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Contributions



The Development of Osteopathy.

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Let the theory sound never so well, if it is barren of fruits and void, who cares for theory? Osteopathy is not barren. As proof see its fruition of a decade.

Ten years ago the founder, A. T. Still, was the only osteopathic physician. He fathered a school at Kirksville, Mo. From this others have sprung until the osteopathic colleges there, at Des Moines, Los Angeles, Boston, and other points, rank high as educational institutions, and have graduated an army of over two thousand osteopathic physicians.

Osteopathy is so young and the standard of its colleges was advanced so early in its history, that while the requirements and courses in medical schools and in those of some other professions, have been recently extended until they are at the present longer, and perhaps in some respects more complete, than are those in osteopathic colleges, we believe we are safe in the statement that the average recognized osteopathic physician has undergone a longer course of professional training, than has the average professional man in law, dentistry or medicine. More than this, an early extension of the course is looked for. All this notwithstanding the fact that the osteopath need not master the intricacies

cies of drug giving, nor the limits called for in the prescribing of poisons. Is not such an army of educated men deserving of some respect and the life work that has called them worthy of some consideration?

Osteopathic physicians have been tried in the courts, and medical societies have exerted every energy to secure legislation against the new science, and gained temporary victory in some states, but their victories were short lived. Osteopathy only asked opportunity to demonstrate its merits and the people thought it a fair request. At present there is hardly a state in the Union where osteopathy is not practiced and a large number of the states have special legislation legalizing and regulating the practice.

While we state that medical societies have fought the new "heresy" with inquisitorial zeal we would not intimate that all medical men are our foes. As osteopathy has developed and demonstrated its capabilities, hundreds of the most refined and educated gentlemen of M. D. degrees have investigated the principles and endorsed its methods, sometimes undergoing treatment themselves and in many cases advising certain of their patients to give it a trial. Many have also taken the regular osteopathic course and are practicing the drugless science pure and undefiled.

Osteopathy is endorsed by leading men in every profession, and by all stations and ranks of society. As examples of these endorsements we quote from Hon. L. M. Shaw, secretary of the Treasury, Ex-Governor of Iowa, etc.; "I am fully convinced that osteopathy is a rational system of healing."

The late Ex-Governor John P. Altgeld of Illinois said: "When prescriptions and drugs were as ineffectual as empty words, it came to the rescue of myself and Mrs. Altgeld and did that which other things failed to do. Honor those to whom honor is due."

So we might continue to give extracts similar to the above from what numbers of statesman have said. Many men who were governors at the time when osteopathic legislation was before their respective states have put themselves on record with statements similar to those quoted. Among them we may mention Hon. Josiah Grout, Vermont; Hon. Lon. V. Stevens, Missouri; Hon. T. A. Briggs, North Dakota; Hon. H. S. Pingree, Michigan; Hon. E. A. Lee, South Dakota; Hon. B. McMillan, Tennessee; Hon. John R. Tanner, Illinois; Hon. Edwin C. Smith, Vermont; Hon. R. L. Taylor, Tennessee; Hon. Wm. P. Dillingham, Vermont.

Among the number of people of national reputation who have become converts to osteopathy and from whom we might quote we mention: Senator J. B. Foraker and wife of Ohio, Chief Justice Springer, Opie Reed, Mark Twain, Sam Jones and many others.

Theory and Principles.

Our drawing illustrates some of the fundamental principles of osteopathic theory. It is not an accurate picture of the parts represented, nor does it show their exact relation to each other, thus the nerves as a rule run downward some distance from the spine to the organs they supply instead of directly to them as here shown. It is rather a diagram to make clear our description. It represents one of the vertebræ (back bones) with the ends of ribs attached to it and the other organs that lie near it. The spinal cord, the layer of muscles and the large arteries are supposed to run vertically to the picture, and we are looking down from above upon their cut ends and upon the vertebra and other organs. The heavy line across the smaller figure to the left represents the plane of this drawing and locates the picture for us.

The spine, besides the sacrum and coccyx at the lower end, is composed of twenty-four such vertebræ as that shown. These lie one upon another forming a strong, but flexible column, while a large hole in the substance of each aids in forming the protected canal through which we see the spinal cord passing. This is the great nervous highway, extending downward from the brain, as seen in the small cut, and connecting most of the nerves of the body with the brain.

Passing out from the spinal cord on either side through a groove in the vertebra, we may see a nerve which divides into many branches. We may trace these branches to the stomach, liver and spleen, to all the arteries and to the layer of muscles which fills the ugly groove along the spine.

Similarly a pair of nerves pass out above each vertebra and they supply every organ in the body with nerve force. Now, there is a similar groove on the lower side of the vertebra above which fits over the one here shown, and together they complete the canal through which the nerves, arteries, veins and lymphatics must pass. One vertebra or the other may slip a little and so compress the nerve and blood vessels, interfering with their action. Further, notice that the head of the rib lies right next this channel, and while it is bound quite firmly to the vertebra with ligaments, it is subject to motion and may become twisted so that it will interfere with these structures.

Now consider for a moment the effects of this pressure as it affects the nerve. First it may only irritate the nerves to the various organs, in which case there is excitement, leading to such effects as irregular heart beat, asthma, weakness of the eyes, some forms of dyspepsia, and diarrhoea, and if the irritation is severe enough there may be continual pain and distress in the region of the distribution of the nerve affected. There may be pain for a time till the sensory nerve wearies, while still the irritation of the nerve to the internal organs is kept up. On the other hand the pressure may be sufficient to paralyze, or partially paralyze, the nerve, when the action of the organs may be impaired. This may result in weak heart, torpid liver, constipation and many other affections. These troubles are cured by osteopathy in fact as well as in theory. The nerve is released and then if it has been over excited it is quieted, or if it has been paralyzed it is stimulated by the proper manipulations.

Again notice the cut and see that while one branch of the nerve runs forward to the internal organ, another branch of the same nerve runs backward to the muscles along the spine and to the skin covering them. Any irritation to the nerve controlling the organs, or even a primary affection of the organs, affecting the nerve is reflected at once over this branch to the structures along the spine. From this we see why the spinal condition is to the osteopathic physician so important a key to the condition of the patient.

We may now explain briefly the effect upon the spinal structures. A part of this muscular mass is called the erector spinæ because it supports the body and keeps the spine erect. These muscles are kept partially stretched by the nerves, but if there is an irritation to the nerves, they contract into hard rolls, causing aching and pain. They extend from vertebra to vertebra and from rib to rib, and if a single group of them is contracted we see how they may draw the vertebræ or ribs out of their line and place, sometimes causing spinal curvature and at least causing further nerve irritation and trouble.

La Grippe, especially, as well as colds and many other diseases, causes just such contractions, and this is responsible for the backache of this affection and accounts for the fact that so many other diseases and troubles follow so comparatively unimportant a disease. The contractions are kept up after the disease seems to have blown over.

The osteopath, by his manipulations, not only locates the trouble from these contractions, but he may relieve the contractions as well

and give ease to the patient as well as pave the way for future health.

In the consideration of disease we must not only consider the nerves and their action, but we must devote a little time to the circulation. In the illustration we see the large artery (the aorta) which leads from the heart sending off branches which run backward and nourish the bones, muscles, etc., and also the spinal cord itself, so feeding the very nerve centers. In the small cut we also see an artery that carries nourishment to the brain. Notice, too, that small branches are given off from the arteries to the nerves.

The nervous system must be well nourished, or we have such troubles as nervous prostration, St. Vitus' dance, insomnia, etc. Even insanity has been cured osteopathically by restoring the circulation to the brain. Fevers and some forms of headache may be largely controlled by regulating the circulation to the brain.

Notice how easily the blood supply to the spinal cord may be interfered with as it enters or passes through the grooves in the vertebra, giving rise to spinal irritation and sometimes partial paralysis.

Again we invite attention to the nerves which are seen to give off branches which are distributed to the arteries. Every artery is surrounded with a muscular coat by means of which the nerves control its size and the amount of blood that passes through it as pressure on a rubber tube controls its flow. We see at once how we can control the blood supply to the various organs through the nerves, and so regulate their nutrition and health. In this way we reach congestion, catarrh of the various organs, and inflammations, such as gastritis, appendicitis, ovaritis, etc.

Kind Reader! We have endeavored to present to you a little osteopathic philosophy. You see it is nothing but a mixture, or rather a compound, of anatomy, physiology and common sense.

In endeavoring to avoid tediousness we have shown you but a little anatomy and a few diseases. Osteopathy may be applied to all, for they all affect the anatomy and should be treated with common sense. We have shown something of the spinal treatment, but treatment is also applied to the organs direct, stimulating them to action if they are torpid or quieting them if over excited, in all cases improving their circulation and removing obstruction to veins, etc.

While we could not show the veins in the cut without complicating it too much, they accompany the arteries and carry the blood which has been used, back to the heart. These may be interfered with by

bony displacement or muscular contraction, and as a result, according to the location, there may be dropsy and swelling, deafness, dizziness, eczema, goitre, milkleg, coldness of parts, or female troubles, these affections yielding readily to osteopathic treatment.

Dislocations and deformities are, as a matter of course, right in line of the treatment, and their cure has contributed no small part toward the advancement of the science.

Osteopathy and Medicine.

Osteopathy was impossible much earlier. Anatomy and physiology had first to be developed.

It could not have come much later; for people were beginning to demand something better than the uncertainties of the drug medication.

Drugging is admitted by all schools to be empirical. It is founded on experiment with drugs. It is continually changing.

After two thousand years of experiment the last few years have so revolutionized the practice that the regular treatment administered thirty years ago, if administered to-day, would be regarded as criminal malpractice. How will the next generation regard the administration of poisons by this? "Regular" physicians admit of but three or four specifics, and these are disputed. Osteopathy accomplishes the results. We do not know what medicine does, therefore we practice the drugless method separately and apart.

Surgery is not empiricism, but has achieved the dignity of a science. Osteopathic practitioners believe in surgery and its necessity, also in its necessary anæsthetics and antiseptics. They believe, however, that it is practiced too often and that osteopathy may often save the necessity of an operation.

They study surgery, but as a rule do not practice it. In this century of specialization their specialty is osteopathy while a surgeon should likewise be a specialist in his line.

Points Concerning the Treatment.

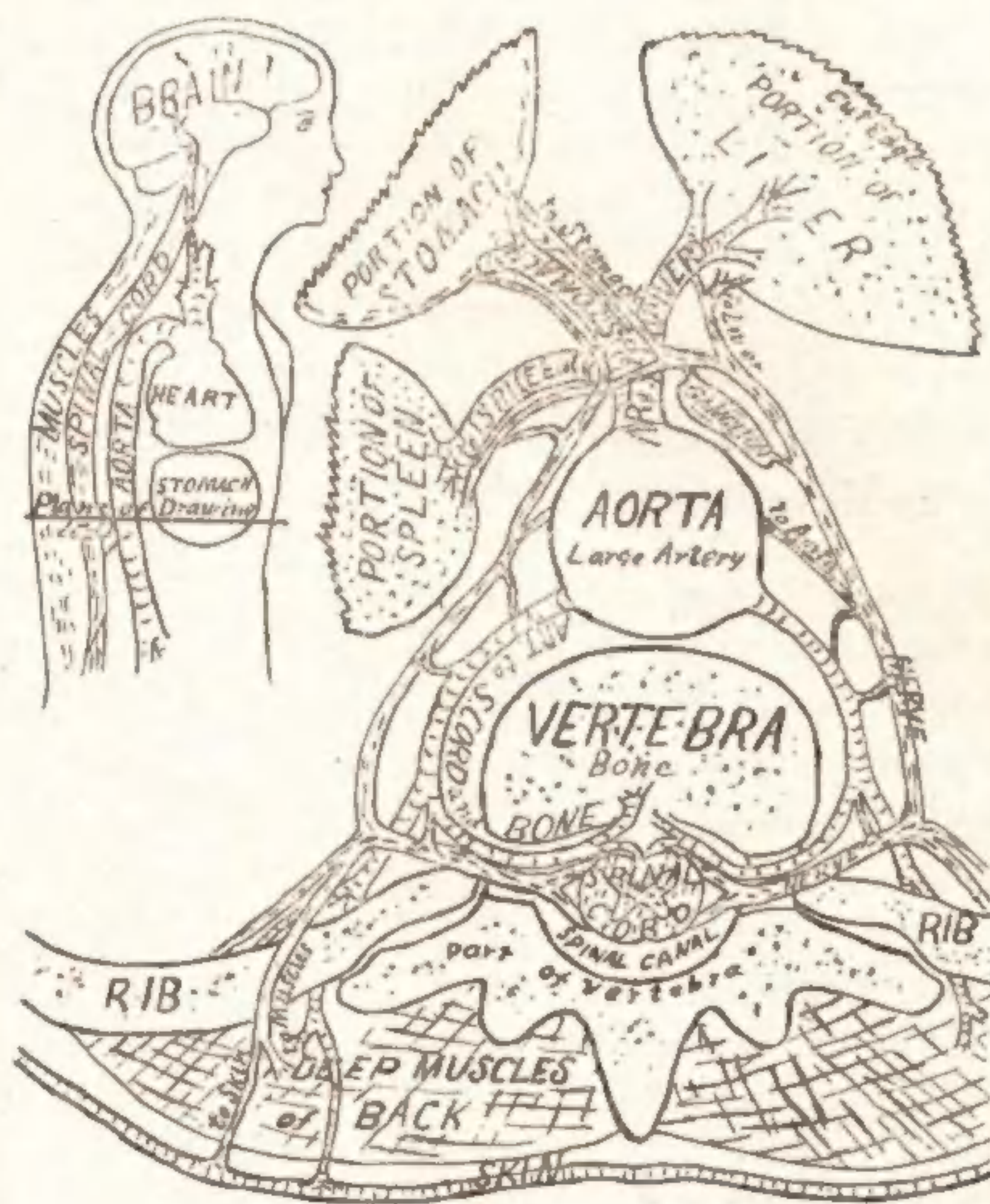
The treatment is not severe. In some cases, if the patient is especially sensitive, he may feel a soreness after the first few treatments, in some cases feeling really the worse for a week or two, but generally he is refreshed and may say that he would like the treatment for the luxury of it if there were nothing the matter.

There is no exposure connected with examination or treatment more than should be required by any first class physician making a

thorough examination. There is nothing about the treatment which should be repugnant to the finest sensibilities.

Osteopathic results are not slow, because they are results. They are not always instantaneous, however. Because your neighbor was cured with one or two treatments do not expect the same for yourself. You may have suffered no longer, but there may be more tissue to rebuild in your case. The osteopathic physician can set conditions right, but nature must have time to repair.

Suppose it requires some months to cure a condition that has been



coming on for years. You have tried other things for a year at a time and it has baffled them all. If osteopathy can accomplish anything in a fraction of that time, even though it be several months, it is not slow. Try its speed with acute affections or those of shorter duration.

Many drugs give promise of immediate results. They stimulate, but later comes the reaction. Osteopathy removes the cause and tends to permanency. There is no reaction.

We cannot tell you what the treatment is like. It is not rubbing, pounding, pinching or massage. It is proper osteopathic manipulation. Come and see what it is like.

There is no point on which osteopathic physicians pride themselves more than on their thorough examination and their rendering of honest opinions as to whether a certain case can be benefited by the treatment. If an osteopath thinks he cannot help you he will tell you so.

The treatment is not expensive considering the results accomplished. Remember that it may save many times its expense in surgical operations and changes of climate.

It will start weakly children on the road to health and prevent years of "doctoring."

It rejuvenates the woman, "almost an invalid," and puts her in condition to enjoy life again without constant medication.

It is just the thing for the worn out business man, renovating his nervous system and in the end saving him time and money.

Osteopathy and Earlier Mechano-Therapeutics.

By Edward Oelrich, D. O., Buffalo, N. Y.

The old phrase, "There is nothing new under the sun," applies as well to osteopathy as to whatever else the world at present contains. By this it is not meant that osteopathy in its present developed state has existed for ages before the time of Dr. A. T. Still; it is intended, rather, to imply that the historic beginnings and advances of our honored science have been made in centuries of time and in world-wide regions.

Manual therapeutics of one sort or another have existed in nearly all portions of the world since the remotest antiquity. In fact, it is the oldest method of treatment in existence. Java, China, Hawaii and other countries have doubtless known the value of manipulations since man—in those countries at least—first thought of a means of relief for his physical pains. In classic times, Hippocrates himself, to the amazement of the mystic physicians of his time, proclaimed that manipulations could make a stiff joint flexible and a weak joint strong; that by the same agency a fat person could be made lean and a thin person fat. Galen recommended the "movement treatment" for nearly all diseases. Celsus suggested manipulations for the removal of deposits in tissues and especially for the relief of pain. In Rome, during her days of luxury,

the manipulators were greatly in demand among the pleasure loving nobles, for the relief of the thousand ills their debaucheries had brought upon them.

The famous sanitarium of Asclepiades is an interesting example of the popularity of the manipulators, or whatever they were called in those days.

It was singularly fitting that osteopathy should have arisen in America. The lack of a scientific system of manipulations in our country was sufficient reason for the creation of such a system and for its success. It is true, a few imported masseurs have tried to make a living under medical patronage; and there has been practiced for some years in this country a kind of "rubbing" which assumes the name of "massage." Practiced as it is by people who lack even a rudimentary knowledge of anatomy or of disease, this so-called massage is as often harmful in its effects as otherwise. Apropos: Dr. Marus Jokai, the famous Hungarian novelist, in his book, "Dr. Dumany's Wife," states that massage ignorantly applied is as harmful as a dose of quack medicine.

The mechanical treatment, however, which is most closely related to osteopathy and which is of far greater scientific interest than the crude methods of eastern lands or the cruder methods of the so-called "masseur" of America, is the system originated by Peter Henrik Ling of Sweden. Nearly a century has gone by since the strivings of Ling and his followers for the recognition they so much deserved. The history of the advance of this method is singularly like the present history of osteopathy. To quote from Dr. Arvid Kelgren's book, "Ling's Manual Treatment,"—"The path, however, of this new method was not a smooth one, for as soon as the effects of the treatment began to show themselves, the Swedish Medical Physicians did everything in their power to prevent its further progress. At first they tried to kill the system by silence or assailed it with sarcasm; but finding these means useless in the face of cures resulting from its application, they began an active resistance." It is pleasing to note that the Swedish government, so notoriously intolerant that even at the present day the importation into Sweden of homeopathic medical remedies is prohibited, should have founded the Royal Central Institute of Stockholm for the teaching of Ling's system and with Ling as its chief. As Kelgren says,—"It is due to Ling's system that there still lives in Sweden a strong and healthy people."

Unfortunately for them the timidity of these Swedish manipulators has been the cause of their weakness. In many places it is not their policy, to consider themselves as independent physicians; although they are quite as well trained in the essentials, the diagnosis and the treatment of disease, as the average medical doctor. They seem to prefer the patronage of drug physicians who know little or nothing of the value and wide application of their work and who naturally would recommend them only as a last resort and not at all if their harmful poisons produce effects simulating a cure.

In Germany great advances are being made in the application of mechanical methods for the cure of disease. Item: "Massage in Diseases of Women," a book by Dr. Ziegenspeck, professor of Obstetrics and Gynaecology at the University of Munich, is deeply interesting from an osteopathic standpoint because of the close relationship of the German and the osteopathic methods of treating female pelvic troubles. Dr. Ziegenspeck discusses only the manual treatment of the uterus and adnexa. He says (after treating a thousand cases of prolapsus, flexions, parametritis, etc.),—"It would seem that the number of patients and the length of the period of observation were sufficient to cool any too great enthusiasm which a new method is likely to arouse, and to settle any doubts as to the permanence of the results of the treatment. My conscience would revolt were I to fail to recommend this treatment in even a single instance in which I have used it in the past. No method cures so quickly, none has so few relapses." For the benefit of our medical friends I will quote Dr. Ziegenspeck further,—"I repeat it for the third time, the excessively large number of physicians so universally complained of nowadays may be profitably and successfully employed in this manner" i. e., giving these manual treatments.

While other lands have originated and more or less developed their systems which to some extent resemble osteopathy, it has been reserved for our own country to produce a system which, in its completeness, its perfection and its almost universal application to the cure of disease, dares (and with perfect right) to assume a position at least co-equal with the present drug systems.

Osteopathy, from its character, naturally embraces all that is taught by the followers of Ling, of Brant or of Ziegenspeck and the little good contained in the pseudo-massage of America. In common with other schools of healing, it makes use of hygiene, diet, hydrotherapy, etc., which are common property and of acknowledged value.

The earlier scientific mechanical treatments had for their basic principle the theory that normal blood and nerve supplies to a part were the essentials to the health of that part. The first osteopath and his followers recognized and made use of this great truth, but they have added to it the theory that disease is often due to the mal-adjustment of parts of the body. By this is meant that a luxated vertebra, rib or other bone may irritate a part or cause pressure on the blood vessels or nerves to that part, thereby depriving it of its proper nourishment and control. Thickened tissues, contracted muscles or misplaced organs produce the same effects.

It would be incorrect to assume that osteopaths are the only physicians who consider mechanical imperfections a cause of disease. Hilton's classic "Rest and Pain" recites several examples of disease cured by the removal of mechanical obstructions; Dudley (page 686) tells of a case of menorrhagia and endometritis cured by correcting a curve in the lumbar region of the spine. However, osteopaths, as a class, are the only physicians to look for these misplacements, etc., and when finding them seek to remove them by the only means possible—i. e., by manipulations.

Aside from the inherent worth of osteopathy, the strength of the osteopathic movement lies greatly in its independence of medical domination and its contempt for medical criticism. Unlike the timid Swedes who, in this country at least, place themselves at the beck and call of this or of that ordinary drug physician to be prescribed by him for some patient whom the usual strychnine, arsenic, etc., have singularly failed to benefit, the wise founders of osteopathy launched a grandly built ship which needs no little tug to draw it. The independent patronage of the people has been sought for and as a result a powerful clientele has been created to defend the practice, to spread its fame and to insure its permanence.

What is a "Cure?"

By Edythe F. Ashmore, Detroit, Mich.

For more than fifteen hundred years, even before the days of Hippocrates, certain persons have spent their lives in the study of healing the sick. The object of their studies has been to effect a cure, for that is the end of healing. The methods employed have varied greatly until osteopathy has been evolved and in its perfection it will be the

way by which all travelers to the domain of health from the devastation of disease will pass. It is the purpose of this article to review briefly its claim to place as the most natural and rational means to the great end, perfect health.

A cure, in the first place, is performed only when the causes of disease have been removed and the tissues diseased have regained their normal structure and functioning powers. Now, the causes of disease may be external or internal, but osteopathy considers primarily the internal causes, those that are inherent in the body, both toward the production and elimination of disease. Let us consider any one of the diseases of bacterial origin. Immunity, claims the theorist, is the gift of the few. Immunity, claims the practical thinker, is perfect health. He who is immune to the disease does not fall a prey to it because the tissues of his body to be attacked by the disease are in a condition of perfect health. What shall be done in the treatment of the one who was not immune? Logically by bringing to perfect health the organs affected. Structures first must be corrected. In correction lies nine-tenths of osteopathic cure. Function being dependent upon structure, correction of structure produces normal function. Thus phagocytes, the scavengers of the body, carry away the wastes of diseased tissue, perhaps even the germ itself, disease abates, and a cure is performed.

Let us consider drug application as a method of healing. All things taken into the body are either food or poison. Drugs not being food are poison and hence the primary impression made by them is pathological. In administering a drug, we but add one pathological condition to another. We fight the ravages of disease plus the ravages of a drug. Says London Lancet (May 24, 1902), "It often happens, though, that the primary cause ceasing to act, the disease still continues. This may be through the evil intervention of other causes (drugs) the influence of which the state of the organism induced by the primary cause has made patent."

Had the physicians who administer drugs an actual knowledge of the effect of their doses, one thing they would know: how to combat one drug with another, but to neutralize a drug's effects upon tissues is a very different thing, and quite as unknown as a specific for every disease which is not within the ken of any conscientious physician. This is not said from prejudice, but upon their own published statements, and if one may not believe the authoritative texts, where is one to obtain any reliable information?"

We daily hear of the family doctor who doesn't believe much in medicine. He is a God-fearing man, living up to the demands of his conscience, one who would tread on no uncertain grounds. Says the writer in London Lancet, "Beholding the complexity, the adaptability, and the various nature of the component systems of the human organism he (the physician) suspects in it an almost infinite capacity for readjusting disordered processes or for expelling injurious influences. Thus he is led away from a vigorous, often harmful, empiricism into a watchful, perhaps even a timid, attitude in the treatment of disease."

Occasionally we are asked if a knowledge of medicine would not aid us in the pursuit of our own science, and naturally we ask with curiosity, "How?" Could we add to our stock of general information a knowledge of many things, medicine might not be unworthy of consideration, but time is limited and it would be well to allow each to follow his own inclinations. Again, could we in any manner treat our patients more successfully knew we their previous drug dosage? Certainly not, since the eliminative agents are the same. Since we correct structure and stimulate or retard functional activity through structural readjustment, it matters not whether the pathological condition fought is one of drug or germ production. We but dissipate energy when we wander away into a study of the theories of a condition. All our forces should be applied toward readjusting structure that health, which is obedience to law, may result.

The vainest argument of all has been the advantage to us to answer the questions of patients concerning drugs. As stated above, how can we answer what the student of drugs himself does not attempt? Once more, consider the position of the osteopath in the world of healing. We are reformers, struggling for the best, and at the same time aiming to reduce the healing art to a science that shall be so simple and plain that a wayfaring man though a fool need not err in understanding. Like all reformers, osteopaths must be educators and educating the laity in anatomy, and physiology is but placing him fairly in the walks of health and life. Structure is anatomy, function is physiological action, and the perfection of both is health. If health is lost, it can never be better regained than by the methods of that system of healing that first, last, and always considers the human body a perfect organism when its parts are adjusted, one to another, perfectly, "in His image."

The Confessions of a Vaccinator.

From Medical Talk.

Martin Friedrich, M. D., health officer of the city of Cleveland, in an article to the Cleveland Medical Journal, made a very remarkable confession to his fellow vaccinators. It was not intended for the general public, and it is very ill-natured on our part to publish it, but we would like our readers to know the facts. We give them without further comment. Here follows the confession:

Two years ago there was a general complaint among medical men that the (vaccine) virus did not take, and a clamor was raised by the profession for (vaccine) points that would take. The manufacturers seem to have yielded to this pressure, and send out points which are active. Last year I was offered samples of points with a verbal guarantee that every one would work. I tried one of them. It "took," but Oh, what an arm! I had to console the poor mother with the usual subterfuge that it was a splendid "take," that her boy surely would have had smallpox if he had come in contact with it, and that he would have had it very badly.

The next point, I tried on a man who was broken out with smallpox. I told him that it would modify the disease, and that he would not have it so severely. He had only a few pimples on him. His arm also became very sore. I had to tell him that the vaccination drew all the poison to that arm, and that he would have had a terrible eruption if I had not vaccinated him.

Still I was not satisfied. I wanted to vaccinate some one who had just recovered from smallpox, to see whether it would take. For quite a while I could not find anyone foolish enough to let me try the experiment; but, as luck would have it, I was sent to a boarding-house to vaccinate all the inmates, for they had all been exposed. The first one who came up to me had had smallpox about six months before. He was a little gay from drink, and swaggeringly bared his arm, saying: "You may vaccinate me all you please." I knew him, and I used the point which I wanted to try. After I had vaccinated him he began to make fun of me, saying that it would never "take" on him, that it had been I who had sent him to the hospital, etc. This man developed such a horribly sore arm that I had to dress it daily for five weeks, and I did it willingly and thank my lucky star today that I got out of it so easily.

Last year the virus took altogether too well. Fully one-fourth

developed sepsis. The arms swelled clear to the elbow; yes, clear to the wrist joint, with high fever and enlargement of the axillary glands; pieces of flesh as big as a dollar and twice as thick would drop right out, leaving ugly suppurating wounds, which to heal took from six weeks to three months. I had to dress a little girl's arm for 15 weeks before it got well. This is not vaccina, it is sepsis pure and simple, and such a vaccination does not protect against smallpox; as I have found out, at 60 Louis street, where three children developed smallpox 19 days after a seemingly successful vaccination, when they ought to have been so immune that inoculation with variolus pus itself should not have produced the disease.

To top the climax four fatal cases of tetanus developed after vaccination. No one has ever demonstrated the presence of tetanus bacilli in any virus of any make. It seems to be a secondary infection. But no one can doubt that there is some connection between tetanus and vaccination. The vaccination seems to prepare the soil for the tetanus bacilli by causing suppuration.

[The above confession was read before a medical society and some discussion followed. During this discussion Dr. Friedrich said:]

A man would have to have a heart of stone if he would not melt at the sight of the misery which vaccination with impure virus produces. Visit a happy family with your impure virus and make your appearance, at the same house, two weeks later, and you will be horror-stricken with the change that has taken place. Instead of a smile they will receive you with a curse. The father has been thrown out of employment on account of a sore arm, every child is crying with pain, shrieking as soon as they see you come, the mother frantic with fear that next week the family is going to starve, that some child may lose an arm or even its life, and you stand there and witness the tears and cries and pains and misery of which you have been the cause. The man who can stand all that is no man.

Dr. Rosewater thinks that it is always the parents' or children's fault when the arm becomes unduly inflamed, that we ought to tell the mother that she did not keep her child clean, and to the child that it scratches the sore with the finger nails. Doctor, "You cannot fool all the people all the time."

A sigh of relief went over the city when I stopped vaccination. The people began to work in harmony with us, opened their houses for us to disinfect them, gave us all information wanted, and helped us in

every way conceivable. It would have been impossible to disinfect whole districts if we had found determined resistance. We had to gain the people's confidence and good will.

Osteopathy Beneficial.

The following testimonial from United States Senator T. C. Platt may be of interest not only as coming from one of influence because of his eminent position, but because he speaks from a personal knowledge of the benefits derived from osteopathic treatment. It will be seen also that he is in good company, Mark Twain, Senator Foraker and others of high standing in the estimation of the American people and throughout the world being earnest advocates of the new system from personal knowledge of its merits:

"I am a firm believer in osteopathy. I have been taking this treatment for some time and am firmly convinced that it is beneficial. H. H. Rogers of the Standard Oil company was the first to interest me. Then, too, such men as Mark Twain, Senator Foraker of Ohio and others told me of the treatment, discoursing at some length on its merits. There are some features about the osteopathy treatment which do not appeal to me strictly, but I can truthfully say that in a general way I have found it a most efficacious remedy for nervousness. It has strengthened my legs and arms and has been of benefit to me in many ways.

"The work of the osteopath is rather harsh, but I am willing to stand it, the compensating results being such that I am glad to undergo the rough usage."

Constipation.

Osteopathic Success.

A Review of its Medical and Osteopathic Treatment.

Epsom Salts. (Magnesium Sulphate.)

Rhubarb.

Mercury. (Blue Mass, Blue Pill.)

Castor Oil.

Aloes.

Podophyllin.

Cascara Sagrada.

Compound Cathartic Pill.

No disorder more common; no disorder more intractable; no disorder more distressing than constipation. The whole pharmacopoeia has been

plundered to find a remedy. None has been found. Above, we have listed the more common drugs resorted to, but no one is claimed as curative. Temporary relief alone is promised. Listen to what Dr. H. A. Hare of Jefferson Medical College, Philadelphia, in his "Practical Therapeutics," page 491, says of each:

"Purgative Salts (Epsom Salts, Rochelle Salts), are habitually employed by many persons in daily doses. They are exceedingly harmful in such instances, rapidly losing their power and decreasing the patient's strength by the abstraction of liquids and salts from the blood. They often produce anemia when constantly used."

"Rhubarb, although it purges, is distinctly astringent, and is, therefore, more constipating in the end than if no drug had been used."

"Mercury, (Blue Mass, Blue Pill), is exceedingly harmful if used continuously as a purge, and the cause of much ill-health, of bad teeth and of digestive troubles."

"Castor Oil is notorious for its tendency to cause ultimate constipation."

"Aloes is distinctly harmful, if continued for any length of time, as it serves to produce atony of the bowel."

"Podophyllin, in small doses, is laxative, but is a purgative and almost drastic in larger amounts. In over-dose it may produce gastro-enteritis."

"Cascara Sagrada is employed simply to empty the bowel of fecal matters in cases of constipation."

"Compound Cathartic Pill. In obstinate constipation we are sometimes forced to resort to the compound cathartic pill."

What an impeachment of drug action! The conclusion of a college authority in materia medica! We can add nothing to the arraignment.

Now, what are some of the more common causes of Constipation? We list them as follows:

- 1) Sedentary life.
- 2) Simple laziness.
- 3) Female modesty.
- 4) Lazy liver.
- 5) Deficient nerve life in the bowel.
- 6) Muscular weakness in the lower bowel.
- 7) Lack of secretion in the lower bowel.

Sedentary life forbids the exercise essential to proper liver and bowel activity. Simple laziness resists the calls of nature until the bowel itself becomes lazy. Female modesty prefers to suffer rather than visit

a public closet. Lazy liver means lack of bile, and lessened intestinal stimulation. Muscular weakness signifies inability to express bowel contents. Lack of secretion in the lower bowel means diminished lubrication for excrement. Any one of these causes, or indeed a group of them, may play a role in the condition.

What does osteopathy promise in the treatment? In 95 per cent of all cases it both promises and yields a cure. Four facts osteopaths recognize as contributing to radical betterment:

- a) Diet.
- b) Habit.
- c) Exercise.
- d) Manipulation.

a) Diet. Eat sparingly of meat, but largely of vegetables. Fruits, such as figs, apples, prunes, dates and tamarinds are indicated. Avoid, however, blackberries, strawberries and raspberries. Curtail coffee and tea. Milk, as a prominent article of diet, must be forbidden. A glass of cold water on arising, or just before breakfast, or a glass of water hot as can be borne, may be substituted.

b) Habit. Go to the closet at a regular hour daily, even if no result follows. After breakfast or after mid-day dinner is the preferred hour.

c) Exercise. Moderate exercise in the open air contributes not a little to betterment.

d) Osteopathy deals with the cause, and the first endeavor of the osteopathic physician is to seek out the exact condition existing, and prepare for its removal. The nerve life of the intestine is carefully considered, and particularly is he concerned with the spinal nerves as they find exit from the spinal column to pass to the bowels. Here he stimulates them to normal activity, or removes impingement upon them at their seats of origin. Muscular tone is then restored by direct manipulation to the inert muscles, and the lazy liver is stimulated to respond to the new nerve life. The liver, which is so often torpid, is treated with regard for its nerve connections, and direct manipulative measures are applied to secure correction of its morbid processes. Any impactions or obstructions in the gut itself are removed, and the natural intestinal purgative, bile, sweeping down from the liver, renders the bowel clean and clear of its debris. At times, at the discretion of the osteopath, it is judicious to dilate the rectum in order to overcome the lack of sensibility there, and secure a normal response to bowel conditions. As a result of these measures, 95 per cent of all cases of constipation are cured when all other means have failed.

The Law of Compensation.

For pleasure or pain, and for weal or for woe,
'Tis the law of our being to reap what we sow.
We may try to evade it, but do what we will
Our acts, like our shadows, will follow us still.

The penalty comes, as effect follows cause,
For every transgression of natural laws.
If ill-wind we sow in the ways that we keep,
The whirlwind shall be the sure harvest we'll reap.

This law is a wonderful chemist, be sure,
And detects, in a moment, the base or the pure.
We may boast of our ancestors, station, or birth,
But this law rates all people at just what they're worth.

We're proud of our mansions of marble and stone,
And store them with treasures from every zone;
While the virtues and graces that ornament life,
Are smothered and die in the struggle and strife.

We start out in life to seek fortune or fame,
And then, if we fail, the world gets all the blame;
But nine times in ten it is plain to be seen
There's a screw somewhere loose in the human machine.

We make ourselves slaves and mean martyrs for gold,
Till health becomes broken and youth becomes old.
If we did half as much for affection and love,
Our lives would be music to angels above.

Are you wearied and worn in this struggle and strife?
Do you yearn for affection to sweeten your life?
Remember this truth, which has often been proved—
You must make yourselves lovable would you be loved.

This law was enacted by Heaven above—
That like attracts like, and that love begets love;
And, though life may appear as a desolate track,
The bread that we cast on the waters comes back.

That "we reap what we sow," is a maxim of truth,
Though a hard thing to learn in the days of our youth;
But at last it shines out, like the words on the wall—
"This law has its debit and credit for all."

Predisposition and Infection.

The Literary Digest.

That a plant may grow we must have, first, of course, the seed and then a soil that favors its germination. So for the presence of disease we must have not only the germ but the favoring soil; in other words, both infection and predisposition. This fact has often been emphasized, but the wonderful development and spread of knowledge regarding the germs of disease has made some of us forget the other necessary element in disease-production. While some virulent germs will grow in any soil, there are others that seem to need special conditions, and by striving to alter these where they exist we are combatting the disease more effectually than if we should wait to fight it after it has actually developed. These facts are well illustrated in an editorial in The Hospital (October 26) regarding tuberculosis. Says the writer:

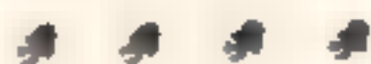
"The germ has been placed on a high pedestal, infection has been made into a fetish, and the faiths of our fathers have been to a large extent deserted. Nevertheless artists and people of observation still hold to the 'consumptive type,' girls and young men are still said to be 'consumptive-looking,' and those who, putting theory on one side, are content to watch events, find too often that these old notions turn out to be correct. ■ ■ * The widespread nature of the infection of tuberculosis makes it fairly clear that something besides exposure to it is involved in the development of the disease. But when we find that not only are the germs widespread, but that a large portion of the population are actually infected by them, and yet are able to throw off the disease, it becomes more evident than ever that it is the condition of the individual rather than the presence of the germ which decides whether a man shall or shall not become consumptive."

Post-mortem examinations, the writer goes on to say, demonstrate that a much larger proportion of the population has at some time or other been infected with tuberculosis than was formerly thought to be the case. He says:

"When we hear that in 500 post-mortem examinations made at the Zurich Pathological Institute undoubted signs of tubercle were discovered in 97 per cent of the bodies examined, and when we compare with that the comparatively small proportion of the population which is carried off by the disease, when in fact we find that far more people throw off the disease than ultimately die of it, we cannot resist the conclusion

that the ultimate result of an infection with tuberculosis must depend far more upon the resisting power of the patient than on the presence or even on the reception of the infective material."

The Editor's Own,



Dr. J. A. Still, Des Moines, Editor-in-Chief.

In the Right Direction.

In the last issue of the Journal of Orificial Surgery (June, 1901, with which issue the publication of the Journal ceased), the editor, Dr. E. H. Pratt, gave a parting or "Final Word" to his exchanges in which he laid emphasis upon some things which he considered of great importance. Among these suggestions was the following:

"The second suggestion which the Journal of Orificial Surgery has to make to its exchanges is that they take up the cause of manual therapeutics and harp on this string until there is a chair of manual therapeutics in every college of the country. This should include Swedish movement cure, massage and osteopathy." "This," the doctor adds, "will serve two purposes; it will not only add a valuable means of curing the sick to our armamentarium—that is by no means too well furnished—and thus save the stampede of cases from regular practitioners of medicine * * * but it will also educate the graduates in the use of their hands. As it is now, the young doctors leave the college with hands as uneducated as plough boys. They are expected to palpate and percuss and settle issues of life and death by the sense of touch, which has never been trained, utterly unable to discriminate healthy from diseased tissues or perform any other act of palpation in a satisfactory manner. This serious omission on the part of the medical colleges costs the laity many lives and the doctors many failures and disappointments. Young doctors should be possessed of some degree of art as well as science and the education of the sense of touch should be begun without further delay in every medical college in the country."

A Tardy Recognition.

It seems somewhat strange that an appeal should have to be made to the medical colleges or to the profession for the recognition of so worthy and important a branch of the healing art or that agitation should be necessary to secure such training in medical schools. But so long have the old school doctors been relying upon pills and potions that it will evidently require considerable effort to get the medical cart out of the old rut. To change the figure, however, we believe we can discern signs that the leaven is working and in time it may be that the whole lump will be influenced by this leaven of common sense. In this connection the following communication and resolutions may be of special interest as indicating the trend of events and a possible awakening along the lines in part at least suggested by Dr. Pratt. The communication was sent to the Iowa Board of Health and presumably to like boards of other states:

"Chicago, April 8, 1902.—J. F. Kennedy, M. D., Secretary Iowa State Board of Health, Dear Sir: As you can through your official connection with the State Board bring up the question of dietetics, physico-mechanical therapeutics and hydrotherapy, I would ask you if it would be possible for you to introduce the following resolution at the next meeting?

"Resolved, that we are in favor of introducing into the medical schools of the United States the practical teaching of the three subjects: dietetics, physico-mechanical therapeutics and hydrotherapy."

We learn from the Iowa Health Bulletin that the communication was placed in the hands of Drs. Powers and Sams, who reported in favor of the resolution and that it was unanimously adopted.

Not a Tail to the Medical Kite.

While it is with pleasure that we recognize the attempts to introduce the various forms of non-drug therapeutics into medical schools, even at so late a period and will certainly rejoice to see the displacement of the old system of drugging even to a greater degree by more rational methods of healing, yet we can not refrain from the suggestion that, if by so doing the medical men expect to reduce these systems to mere appendages to the medical kite, they will find that some of them are altogether too big for the kite.

As to the suggestion of Dr. Pratt that by establishing special chairs in medical schools and by special training the doctors can "save the stampede of cases from regular practitioners of medicine," we think he will find it a little late. The people have learned the value of the new methods, and they will probably choose for their physicians those who have had special training in special schools other than those who have taken up some features of manual treatment, etc., as mere adjuncts to drug therapeutics. We congratulate the doctors, however, on the awakening and wish them and their patients all the good that can possibly come through the modification of their methods and remedies.

A Travesty on Legal Recognition.

The legislature of Illinois, with the ostensible purpose of legalizing and regulating the practice of osteopathy, has in force a law which requires applicants for certificates to practice osteopathy to take the regular examination prepared for M. D.'s, except in materia medica, and those things which are technically medical, and without adding an examination in those things which are distinctively osteopathic. The result is that men who have studied something of anatomy and physiology and who have never for a day or for an hour studied those things which are distinctively osteopathic, occasionally take the examination and secure a certificate to practice. One of these men writes us that he has never attended any college of osteopathy, but that he is going to take the examination this fall for "licence" to "practise" in Illinois. He tells us that savages "practise osteopathy instinctively as does all the human race," and that by a proper manipulation we may cure almost any disease "that the human body is air to."

Certainly our osteopathic brethren in the state of Illinois should enter upon a campaign that will protect them against the issuance of certificates to practitioners who are not graduates of thoroughly good osteopathic colleges.



Health Department,**Dr. C. W. Young, Ph. B., D. O.**

[The readers of this magazine will be much interested in the unusual therapies advocated by Dr. Young in the Health Department. Since this is a journal simply and exclusively for the upbuilding of osteopathy it does not particularly endorse or condemn the doctor's expressions along the lines of his recent investigations. We have received some letters of endorsement of them and some of criticism. The ideal osteopath will be neither too hide bound to give fair consideration to new and unestablished agencies, nor will he be too precipitate in unconditionally endorsing them.—Editor in Chief.]

Fasting.

Last fall the writer had his attention called to this subject by one of Bernarr McFadden's virile editorials. He argued with great show of reason that President McKinley's life would have been saved if he had only continued his fast. Death followed feeding in a remarkably short time. Since then I have read nearly all the articles on fasting I could secure. The most useful information I have obtained from past numbers of *Physical Culture* and *Women's Physical Development*, New York. These magazines contain many valuable detailed clinical reports. In many instances telling photographs of the patients before and after are published, and the benefits shown and described certainly border on the marvelous. These magazines recommend fasting for most any kind of a disease.

Dewey's Book.

The best book on the subject to which my attention has been called is "The No-Breakfast Plan and the Fasting Cure," by Edward Hooker Dewey, M. D., Meadville, Pa. He is his own publisher. I believe that every practitioner in the healing art ought to have a copy of this book,

if they do not want to be behind the times. Every family ought to have a copy, as it describes in a very clear manner an exceedingly powerful agent for complete health restoration, and the poorer you are the more easy it will be for you to make use of the agent.

Remarkable Cases.

Mr. McFadden at his Health Home had one rheumatic patient whose photograph before treatment revealed the stamp of death on her face. The photograph after five months in the Home showed the most marked change for the better I have ever observed in a human countenance. Fasting was a prominent feature of the treatment. At one time she fasted thirty-one days.

The most remarkable case published in Dr. Dewey's book was that of a patient afflicted with dropsy and weighing two hundred and nine pounds. When the fast commenced the doctors said he would die in a few days. He had to sit in an arm chair all the time, as he could neither walk or lie prostrate. Wonderful to relate, he grew stronger as the fast continued, and on the twelfth day he walked a half a mile and some days later he walked four miles. He fasted for fifty days, resulting in complete health restoration, with a loss of seventy-six pounds in weight.

Fasting in Acute Diseases.

These publications maintain that feeding in acute sickness is a barbarity, and my experience with quite a wide variety of cases leads me to believe they are right. An animal other than man will let food alone when he is sick. A man thinks he has to stuff himself to get strength when the digestive organs are altogether too weak to accomplish the complicated and difficult task of digesting food. When one's leg muscles are too weak because of sickness to enable him to stand up you may depend on it the muscles of the stomach and other organs are too weak to do their ordinary work.

I have recently had charge of a case of appendicitis complicated with marked inflammation of the entire colon which was filled with masses of fecal impactions. The patient fasted for nine days with the exception of the third day, when she thought best to eat an orange and a tablespoonful of cream of wheat. That night she had a high fever, rapid pulse and great distress in the stomach. Manipulations calculated to cause stomach contents to leave the stomach brought a marked gurgling sound with resulting relief and reduction of pulse beats and height of temperature. When the patient began to convalesce

she felt better than when the sickness came upon her. A trained nurse in attendance said she never knew a patient afflicted with an equally severe abdominal disorder and forced to take milk every three hours who had so much strength when she began to recover. Of course there was some wasting of flesh, but not any more than is usual when forced feeding is practiced and there was no suffering for want of food.

Dr. Pickler in the Northern Osteopath for June declares that he considers it advantageous to give no food in typhoid fever while the temperature is above 100. He has reported a case of typhoid fever to the Minnesota State Osteopathic Association where a patient under his direction fasted fourteen days and made a very fine recovery.

Personal Experiences.

My readers might be interested to know that I have practiced fasting myself personally. I have made one fast of eighty-four hours, two of sixty hours each and several others of shorter duration and derived very marked benefit from all of them. The deliciousness of food and the sense of freedom from disease after the machinery of digestion was set in motion cannot be adequately described by my feeble pen. The worst drawback was the excruciating agony suffered by my wife during my first fast. She thought I was going to starve to death or at least bring upon myself serious bodily injury, but when she saw the manifest good results she joined with me part way in some of the subsequent fasts.

Fasting and Osteopathy.

Osteopathic manipulations can be made doubly valuable, if the patient practices judicious fasting as an additional feature of the treatment. The most remarkable case I have had was that of Mrs. M., an old lady seventy-seven years old. Two days prior to my coming she had been stricken with apoplexy, resulting in hemiplegia. Her right arm and limb were completely paralyzed. She could not raise a finger or a toe. The physician who was called said that nothing should be done for her; and that she would be likely to pass away most any time.

I induced her to fast absolutely for seventeen days, giving her daily osteopathic manipulation. She drank a good deal of water, took quite a number of enemas and paid special attention to bathing and deep breathing. In a few days she began gradually to have use of the paralyzed member. The longer she fasted the stronger she became. After the end of the seventeenth day she began to eat small quantities of food and continued eating for six days, but as she did not seem to con-

tinue to improve, another fast was ordered which she continued for fourteen days. The second fast ended two months ago. The patient now has a strong appetite and good digestion. She can walk with the limb that was formerly paralyzed and can feed herself readily with the hand that had been paralyzed.

Theory of Fasting.

The writer has but little use for theories. They have done a vast amount of harm. Facts are things to be respected. The fact that a half-dozen persons without a skip have had their bodies purified by protracted fasts so as to enable them to become very materially healthier and stronger carries much more weight with me than the universally agreed on theory of nearly all our medical friends that we must eat every day to maintain strength whether we are hungry or not. But a plausible theory of fasting might help some to see the advantage of it. The physiologists say that during the initial stages of starvation there is no loss of brain or nerve tissue. Hence during a fast the brain and nerves are unharmed and can divert to body purification, the vast quantities of energy required to digest and purify food. One function of the blood is to carry oxygen to the waste tissues and burn them up, and this burning process keeps the body warm. Where no food is supplied there is no fuel except the impurest portions of the body and these are consumed. The body feeds on its diseased parts.

Condition of Tongue.

After a fast has progressed for a short time the tongue becomes heavily coated and the breath very foul, showing the rapid cleansing process commenced by nature. If the fast is continued for a sufficient length of time the tongue will certainly become clean, and the body will be freed of all impurities. This may require two or three days or as long as seven or eight weeks, according to the condition of the patient.

Hunger.

As a rule there is but little real hunger during a fast. I have always found the first meal the hardest to miss. In some stages of the fast there may be a positive repugnance to food. If the stomach is disordered there may come waves of extreme nausea or faintness, but these are pretty sure to pass away in a few hours if no food is taken. If missing a meal produces dizziness or headache you need to fast so much the more surely. No matter how weak or emaciated you may be, you may depend on it, you can fast with perfect safety and with sure advantage until you are keenly and unmistakably hungry. The time

of real hunger will surely come, though it may take several weeks of entire abstinence from food.

Feces and Urine.

The bowels are not likely to move until a few days after the resumption of eating. The urine is likely to be more highly colored, though considerable water is taken, showing how completely waste is eliminated. Fasts will no more cause paralysis of the digestive organs than a few weeks' vacation will render a business man unfit for his work.

Rules for Fasting.

1st. Be sure you are right before going ahead. You must have no fear of danger by fasting or you may receive but little benefit. You might be easily disturbed by the protests and fears of those around you, as they will naturally oppose the procedure, where they know nothing about it. If you cannot see your way clear to a long fast, that is, a fast to the finish, when the tongue gets clean and the hunger intense, take short fasts and get encouragement from the resulting benefit. Keep your mind off from thoughts of food. Think of the purified body you will be sure to secure.

2nd. Keep the mouth and tongue well scrubbed. I have found a tooth brush and pure peroxide of hydrogen the best kind of agents for this purpose.

3rd. Take considerable exercise, but not to the point of fatigue. Walking out doors in the open air is the best kind of exercise, and this is about the only kind that is safe towards the close of a long fast. A patient of fair degree of vitality can continue in his regular occupation during a fast of considerable length. Often a feeling of languor or extreme weakness vanishes entirely after a little exertion. Mental faculties are not likely to be weakened by a fast, and they may become brighter and clearer and stronger during a long fast.

4th. Pay special attention to deep breathing. The oxygen burns up the impurities, and you cannot inhale too much of it.

5th. Drink freely of pure water. Dr. Dewey claims that taking more than the thirst demands is injurious. Often times a wave of hunger can be driven away entirely by deep breathing and water drinking.

6th. Take but very little food at the close of a fast. Two or three oranges is enough for the first meal. A saucerful of some whole wheat preparation is sufficient for the second. The third meal may be a little

more substantial. For many days after a long fast the quantity of food must be limited. Make up your mind to eat only a certain amount that is before you. It is not a particularly hard task to eat only a small amount of food at the close of a fast. The getting famished and having an uncontrollable appetite comes only when you have been unnecessarily frightened with the thought of starvation.

Conclusion.

A few months ago I was filled with amazement and astonishment over the claims of the advocates of the fasting cure, and these feelings have been greatly deepened by personal experiences and observations. I am thoroughly convinced that this is a very important agent, that is natural and within the reach of all, for the attainment of that high degree of health that is the birthright of every human being. But fasting is of very little advantage if, after obtaining a body purified thereby, you continue the same violations of nature's laws that made purification necessary.

Internal Baths.

During the fast of Mrs. M., heretofore described, the nurse was directed to give enemas up to the limit of the patient's endurance. I was greatly surprised at the large quantities of fecal matter that were removed during the seventeen days when no food was taken, and when the nurse reported a large result on the seventeenth day my interest was thoroughly aroused.

Careful palpation, before the fasting commenced, over the entire tract of the colon, did not reveal any hardened masses or fecal impactions.

My interest was still further aroused when I read the pamphlet "The What, the Why, the Way of Internal Baths," published by the Tyrrell's Hygienic Institute, New York City. In this pamphlet Dr. Tyrrell describes how colon cleansing effected a cure of hemiplegia with which he was personally afflicted. I have since read the "Royal Road to Health," published by the same author, wherein the claims of internal bathing are very ably presented. I have also made use of the J. B. L. Cascade sold by this Institute. This is certainly a very ingenious device. It will force water into the colon more rapidly and effectually than any other instrument I have seen so far.

The Health Culture Company, New York City, issue a pamphlet entitled "The New Internal Bath" that is well worth the price of twenty-five cents to any osteopath. This company also sell the "Dr. Wright's

New Colon Syringe." I have found its colon tubes more effectual than any I could secure at a large wholesale house in St. Paul. The colon tube is to be preferred to the ordinary fountain syringe or the cascade, where there is any tendency to troubles of the rectum such as piles or bowel protrusion. Quite a large number of my patients have used colon tubes under my direction and no one so far has complained of inability to insert them into the bowel, though they may be eighteen inches or more in length, but I have no doubt that they might be useless or dangerous where there are ulcers or inflammation of the bowels.

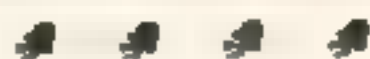
In the Northern Osteopath for June is a very valuable article on the subject of Constipation by Dr. Ernest C. Bond. He speaks in no uncertain sound of the value of colon cleansing.

No doubt colon flushing is unnatural, but large accumulations of filth of the foulest character in a human body is still more unnatural. There are but few people in civilized countries engaged in sedentary occupations whose colons are not pretty well loaded with this filth. I have found these flushings valuable for nearly every patient who comes to me. People afflicted with diarrhoea are about as liable to have fecal impactions as those afflicted with constipation.

Colon flushing alone should never be relied on as a cure for disease. I do not believe that it aggravates the conditions that cause constipation, but on the other hand I think it is but of little assistance in changing those conditions. Its main function is to "dump the grate." Many patients at first need flushing until fatigued every night for a week, and then once every week until tendency to fecal impaction is overcome.

These articles on Fasting and Internal Baths are by no means exhaustive. We intend to try to give additional information on these subjects from time to time in future numbers.

Some Interesting Cases.



Scarlet Fever, Dr. B. F. Bailey, Minneapolis.

In April last we had a lady friend visiting in our home. Almost without warning she began to ache badly. Every bone and muscle seemed to give her pain. We gave her a thorough spinal treatment and had her take a hot bath, cover warmly and drink freely of warm or cold water. At 10 p. m. she experienced hot and cold spells; found she had a much inflamed sore throat and began vomiting.

The next morning a consultation of physicians was called, and it was thought she was suffering from scarlet fever. We 'phoned the Health Board and the examining physician pronounced it scarlet fever.

Five children were in the house and all exposed, and all had the disease. Had constant counsel of two M. D.'s who had been my instructors while in the osteopathic college, and who appreciated the value of osteopathy. We avoided all drugs. Each patient had daily two osteopathic treatments with special attention to cervical portion, kidneys, liver, and bowels—two tepid soda hand baths—fresh air, water, and milk urgently from the first and all the time and sunshine when we could get it. After the first few days, some liberty from the bed, cautiously, frequently broths, fruits, and some vegetables—any solids stintingly. We used gargles, compresses—hot or cold—or other means to relieve minor conditions. These cases all recovered nicely without any drugs whatever and no sequelae for more than a few days. Albumen appeared in one case, a badly swollen gland in another, a very sore throat in a third, but osteopathy was nature's timely aid to a complete recovery.

Infantile Paralysis, Dr. Nellie Slaght, Monroe, Wis.

Child aged 3 years. Had been paralyzed in right limb for 1 year. Muscles badly atrophied—limb and foot blue and cold all the time—foot swollen.

I found the spine very sensitive, especially the right side—a posterior area in the lumbar and muscular contractions all along the spine.

The child was very nervous, also the general health impaired.

Daily treatment directed to the limb and the lumbar nerves, with an occasional general treatment brought about the following

Results:—

After two weeks' treatment she had some use of the entire limb.

After two months' treatment was able to stand by leaning against a chair—also could use the limb freely if not bearing any weight on it.

At end of three months the blueness of limb and foot had entirely disappeared. Child much stronger in every way. Flesh firm and muscles larger, and she can walk by holding to chair or couch.

No. 11. Constipation and Neurasthenia.

Married lady aged 35 years. Mother of two children. Had constipation for 9 years—never had a passage from the bowels without use of physic; also used water enema every alternate day.

Stools yellowish or grayish color. Enema brought away mucus and dark masses which never passed after taking physic.

Had had piles and prolapse of rectum—also had a polypus removed from rectum last year. Liver tender over bile duct. Stomach very tender. Digestion poor.

Patient was extremely nervous. Could sleep only occasionally without use of opiates.

For ten years has had to lie "on face" in order to sleep at all. Could not sleep lying on side or back.

Spine very tender throughout.

Right ovarian region very sensitive. Had an operation eight years ago and all the internal genital organs removed—also a tumor of the right ovary was removed at the same time.

Much aching in neck and top of head.

Neuralgia frequently.

Backache nearly all the time.

Examination revealed a spine which was very sensitive throughout its whole extent. Much contraction of muscles.

Atlas anterior: 6th and 7th cervical very close; 1st to 7th dorsal

flat and tender; 10th dorsal to 2d lumbar posterior and broken; 9th and 10th dorsal on right extremely sensitive.

Through corrected spinal lesions and improved digestion, assimilation and elimination we have the following results:—

After one month's treatment—Bowels nearly normal as to regularity of movement. Nervousness much lessened. Aching in head and neck less frequent. Back much stronger. Sleeps well and could sleep lying on either side. Appetite good. Digestion good.

After two months' treatment—Patient much stronger than she has been for years. Constipation cured. Wonderful improvement in the entire condition. Expect to discharge patient next week.

Torticollis, Dr. Walter Guthridge, Woodbine, Iowa.

In April, 1901, Miss H., aged 8 years, was awakened one night by severe pain in her neck. The muscles on the right side were severely contracted and her head drawn down on that side. Within twenty-four hours the muscles in the left posterior region of the neck and the right sterno-cleido-mastoid muscle were so contracted that her face was turned completely to the left at right angles to the normal position. Extreme sensitiveness and pain with swelling and redness characterized the condition of the neck, while extreme suffering was felt throughout location of occipital nerves. On July 26, 1901, her mother brought her to me for examination. I found a marked scoliosis to left in the lumbar region and one to the right in the dorsal. The mother remembered and stated on a subsequent visit that the little girl had complained in January of the same year that the chair did not fit her back. From examination of the lumbar region I concluded that it was primarily the cause of the trouble, or at least that it had existed for the greater length of time. The patient had often complained of pain throughout the course of the long saphenous nerve. This was the only trouble I could refer immediately to the lesion in the lumbar. I concluded that the spinal curve began in the lumbar and dorsal regions because the general health of the patient before the serious symptoms developed in April, had been very delicate, as we would expect in a rapidly forming scoliosis of the dorsal region. There was marked rotation of the dorsal vertebræ below the fifth, the spine being turned to the left. The angle of the ribs on the right side below the fifth was very acute. The dorsal vertebræ above the sixth were rotated to the right, making quite a noticeable break between the fifth and sixth.

Nearly all the muscles of the neck were in a badly contracted condition, the right lateral and posterior muscles being much the worse. The right scaleni by contraction had elevated the first and second ribs on that side and the right levator anguli scapulæ had held the transverse process of the axis far back, while the right sterno cleido mastoid assisted or balanced by the left splenius capitis, complexus and trachelo mastoid had so rotated the head and atlas on the axis as to pull the right condyle of the atlas off the right condyle of the axis and render the joint motionless. The head was so turned to the left that patient could not see in front well enough to walk over rough ground without stumbling. The spine was so weak that running, or even rapid walking, was nearly or quite impossible. The patient was too weak to indulge in play, had a very poor appetite and was considerably emaciated.

I decided to correct lesions of back first and build up the general health before working directly on lesions of the neck. In two weeks' time the dorsal region seemed nearly normal, the strength and health of the patient had improved beyond my expectations. After this I gave considerable attention to the muscles of the neck which were somewhat stubborn, but yielded considerably to treatment, releasing to some extent the articulations below the axis so that there was slight compensation for the rigid condition between atlas and axis. At this time I turned the patient over to another osteopath who treated her three months. It so happened that he moved out of reach and turned the case over to a third osteopath, who treated the child one month, when the parents became discouraged on account of lack of improvement and discontinued treatment. On Feb. 8, 1902, I resumed treatment of the case. I found the patient much more robust than she was a few months before. The muscles of the neck were stronger and compensation by movement of the 3d, 4th and 5th cervical articulations allowed some more movement of head than had been possible when I had last seen the case. Movement between the atlas and axis had not improved. I was impressed with the idea that definite work on this lesion was all that could benefit the case. I was aware that more than twenty muscles and at least fifteen ligaments with their various attachments and positions had to be taken into consideration. Some of them had to be stretched while others were already too long. The fact that four months' treatment by two osteopaths of experience had had no perceptible effect on the lesion depressed my hopes to some extent, but I resumed treatment with strong expectation of success. I carefully laid

plans for my work, deciding which muscles and ligaments needed lengthening and which needed toning or shortening.

The attempt of the patient to turn face to front had rotated the third, fourth and fifth cervical vertebræ forward on the left side. I concluded that as lack of rotation between atlas and axis had caused the mal-position of the vertebræ below, the latter lesions should receive no attention until the dislocation above was reduced.

All my work on the neck, therefore, pertained to replacing atlas properly on the axis. Gradually the shortened muscles and ligaments yielded so that in two weeks a marked gain was apparent. When ligaments and muscles finally allowed condyles of the atlas to come into position to slide onto the axis; it was apparent that the inflammation in the joint had been so severe that a great deal of tissue had grown into it so as to obstruct the complete reducing of the dislocation at once. Persistent work, however, seemed to cause absorption of the tissue within the articulation and movement of the joint gradually increased. On April 28 the family moved to a western state and desired me to write a letter to the osteopath near their new home. At that date the patient could rotate the head from left to right a little past the center and could hold the head in a natural position.

In January of this year the parents allowed the child to attend school. On attempting to study, headache developed to such an extent that school was discontinued. The vertebral arteries, I believe, were the chief source of this trouble. The position of bones being so abnormal as to make the direction of the arteries so tortuous as to interfere markedly with circulation to the brain. This also was at least partly overcome as the position of cervical vertebræ approached normal. The shape of the ribs had also been corrected so that there was no deformity of thorax.

Perhaps some other D. O. has had a similar case, and possibly originated a theory to explain the cause of the severe and sudden symptoms that developed at the beginning of the case. My own supposition is that the scoliosis that must have developed gradually higher and higher in the spine was the primary cause and precipitated the contractures that produced the first noticeable severe symptoms. The pain and nervous disturbance, it seems to me, would have been sufficient to cause the slight fever and general disturbance so apparent at the time of the onset. I would like to hear from others who have had experience with such cases.

I might add that symptoms seemed to indicate that there was no disease of the vertebræ.

The Inquiry Department,



Dr. Clifford E. Henry, Minneapolis, M. D., D. O.

Report on Inquires.

Report on Inquiry Number Two: Dear Doctor: I have to report that the young man was operated upon by one of the surgeons here and a large psoas abscess was opened. We drained off over a pint of pus, and he is feeling much better, and we hope to completely cure him. I have his promise to let me fix his back as soon as his abscess is healed.

C. B., D. O.

Inquires.

Number 6. I have a case of eczema that has been to a number of M. D.'s for treatment and has now come to me. The case is a man, age 50, and quite fleshy. The eruption is dry and scaly. It is all over the body, but more pronounced in the creases and folds of the skin. It itches and burns most of the time. He has always been used to meat three times a day and wine at dinner and eats very heartily at all times. Has had stomach trouble for some time, gas forms soon after eating, and he has a bad taste in his mouth in the morning. He is very constipated and has piles. The liver is quite tender and congested. The 5th and 6th dorsal vertebrae are anterior, the 10th dorsal is posterior and all the lumbar vertebra are posterior. Now, I suppose the correction of the spinal lesions and starting a good liver circulation is the treatment required, but I would like to know just what is the cause of the eczema.

Illinois.

C. McC., D. O.

X-radiance coupled with osteopathic treatment with a rigid dietary have been demonstrated as practically certain of radical cure. Either method alone has proven only partially successful.—Editor in Chief.

Answer:—This is a case of auto-intoxication, the eczema is due to the faulty action of the liver. Your idea as to the treatment is good, but to it should be added a rigid diet. He should have all wines and alcoholic drinks forbidden. If he smokes, cut the allowance down as much as you can; better stop entirely.

Forbid all rich foods and pastries and have him eat slowly and regularly. Caution him about excessive sexual indulgence.

See that the bowels are moved once every day. In these cases I have found that frequently one of the chief sources of reflex disturbance is an overacting sphincter ani. Make it a rule to dilate this muscle.

Number 7. Dear Doctor Henry: I should like to have your opinion as to the advisability of an osteopath taking a medical course and using both systems in his practice.

Minnesota.

C. H. F., D. O.

Answer:—This question is one that every one must answer for himself or herself. If I should say a medical course is necessary, it would create argument, and if I said a medical course is not necessary, there are those that would argue that it is necessary.

From the very nature of this department all arguments must be kept out, and I shall decline to answer any questions such as the above.

If any practitioner has employed different methods than the one given in the answer to a query, and has secured good results by such treatment, I would be very glad to have the treatment reported. Such expressions of difference of opinion is not argument, but the setting forth of the different ways of securing the same results.

I expect that in numerous instances I shall have to refer a case to the Profession for its aid, and I ask it not to be reluctant to give its counsel.



A Digest of Osteopathic Literature,



Wm. R. Dobbyn, Ph. D., Editor.

The Future of the Medical Profession.

The Forum:—It will not be inappropriate to point out the manifest mission of medicine in the twentieth century. In the first place physicians all over the world will continue with increasing energy to pursue their researches into the cause of disease, with the consequent effort to find new and improved means of prevention and cure. In the second place, the medical profession, when thoroughly organized, will teach the general public the means that have been found to reduce the amount of illness, and to increase the general longevity, and will compel legislative bodies to give more heed to the ever pressing necessities for improved sanitary laws. It will demand laws to check the adulteration of food, and to prohibit the sale of patent medicines containing poisonous drugs. It will also insist that our quarantine methods be made more effective, and the health officers be given greater authority.

The Osteopath Seeks the Cause of Disease.

Dr. R. G. Lewis, in *Journal of Osteopathy*:—But oppression of living tissue cannot continue for any length of time without producing changes in the action, process, product, relations, etc., of the oppressed tissue or its connections. These changes are abnormal and are manifested by unusual sensations, improper motion, disturbed circulation, secretions irregular in quantity or quality, and the like. And so disagreeable and so noticeable are such effects of the oppression of the living tissue that they must frequently receive attention and treatment instead of the causes which produce them. For the patient, desiring to be rid of these effects, these symptoms of disease, calls upon the physician to drive them away as soon as possible and by any means. He tries to do so, many times turning his attention and his efforts to them.

rather than to the cause which produces them. Here it is that the osteopath goes deeper than the medical man, through the symptoms, below the effects, behind the products to the cause of the disease. Hence his success, for he has been taught to find and to remove or re-adjust the cause of the disease. Then of course the effects and the symptoms disappear.

A Brighter Future.

Dr. W. J. Connor:—The twentieth century has opened beautifully for the osteopathic profession. The practice has been thoroughly established, the legal battles have nearly all been fought. These hardships will not have to be borne by the future osteopaths. When they go forth they will not hear, in their imagination, the iron doors of the jail clanking behind them, as many of the older ones did. They will be received in the community as a valuable adjunct to society. They will have some troubles to overcome, however, and they come of the mistakes of the older practitioners, for we made some mistakes, and one of the most serious mistakes was the migratory disposition of many of the early crop. At that time the range was unlimited, and, like the buffalo, when picking got short there was no effort made to cultivate it, but the osteopath folded his tent and moved on to pastures new and fields untouched by the sickle.

Much Mock Modesty.

Dr. L. O. Thompson:—Men have studied the various functions of the human body, and sought and solved many of the secrets of physiological processes, even attempting to discover the secret of life itself, and no protest is made by anyone. But when it comes to the study of the sexual functions, and their relation to health and disease, investigation stops and there is drawn over the whole subject the veil of mock modesty and almost criminal silence. Neither teacher nor writer have aught to say of a real helpful character. Many books have been written on this subject, but with one or two exceptions, they talk all around the subject and just miss giving anything of value. It is popularly believed that the marriage ceremony confers upon every couple all the wisdom they need on these subjects, the right or wrong solution of which means either happiness and love, on the one hand, or a life of misery and wretchedness and perhaps the divorce court on the other. Yet day after day young men and women gaily walk to the precipice and jump over, blindly trusting to fate to solve the problems of the future.

and to time to regulate those matters of which they are too ignorant to appreciate the importance of seeking competent advice.

Loyalty to State and National Association.

The National Osteopathic Association should be the pride of every osteopath in the United States and Canada. It should receive the support of the state association and the loyal adherence of every worthy practitioner. Self interest alone should prompt every osteopathic physician to the establishment of close relations with his state and national associations. The advantages of a large acquaintance; the enthusiasm of numbers; the rejuvenating influence of fraternization, and the holy intoxication of mutual respect, all contribute to the rounding out and full equipment of an accomplished man or woman as an osteopathic practitioner.

Then, too, the osteopathic physician should consider how potent an agency the state and national associations may be in impressing public opinion. And the one thing most needed by the osteopath is the public ear. Public opinion is yet against him, and these annual gatherings attract the public eye, and contribute largely to the possibilities of success for the practitioner. For these and many other reasons we are convinced that the success of the associations should be made a subject of much concern by the physicians throughout the country.

A Notable Lament.

Dr. Du Bose in Alkaloid Clinic:—The present tendency is to give as few drugs as possible. This is rational, but appears in many instances to be growing toward the extreme. Herein the danger lies, and for this reason I feel constrained to raise a protest, for the sounds of warning are to be heard on every hand, and these are to the detriment of the medical profession.

Doctors are losing faith in drugs. It is even suggested that drugs are not physiologic agents, for numerous volumes under the name of Physiologic Therapeutics are being issued, from the pages of which the administration of pharmaceutic preparations is excluded. That these books are most valuable is undisputed, for physicians everywhere should be well acquainted with every measure that contributes to the relief of suffering mankind; but that they are issued under a title, that is a reflection on pharmacology, and a misnomer, is unfortunate.

The attention of our lay readers is respectfully called to this admission by an eminent physician who prescribes drugs in the treatment of disease. We expect Dr. Du Bose to see from his angle of vision and

to consider unfortunate the decadence of that to which he has for so many years given his conscientious support. Men on the average reluctantly and in sadness yield to the light of intellectual advancement. It shatters their charts and for a time gives them, rudderless, to the waves. Like the Scotch woman who sighed when she heard that the people were doing away with hell, they feel a certain loss of—anchorage. In the case of Dr. Du Bose, while allowing for the touch of regret in his comment, we joyfully quote him as one of our best witnesses that drug medication is slowly but most certainly passing into desuetude. This wail of our medical friend announces the opportunity of osteopathy, the lusty young giant in the field of healing.—W. R. D.

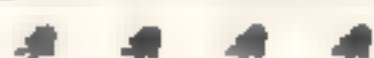
Recent Publications.

The article by Dr. A. Still Craig of Iowa City, which holds the place of distinction in this issue, we believe is the best summary we have seen of the principles of the new science of osteopathy. It is gotten out in a very neat and attractive pamphlet form by the Osteopath Printing & Supply Company, Des Moines, Iowa. The covers are in two colors, embossed, and the little booklet makes the neatest and most attractive for distribution of any we have yet seen offered to the profession. For sample copy, terms and explanations address the Osteopath Printing & Supply Co., Des Moines, Iowa.

Switchlights:—The advance sheets of this book whose genial author is Ed. E. Sheasgreen, now an engineer on the Minneapolis & St. Louis railway, have been received, and from them we judge the book is well worthy a place among our younger poets. Some of the poems are written in dialect and are exquisite in sentiment and fortunate in expression. The book is published by the Iron Trail Publishing Co., Minneapolis.



From the Field.



Minnesota.

Osteopaths will Please Take Note.

Arrangements have been made for the transportation of the delegates to the American Osteopathic Association of the Northwestern States over the St. Paul, Minneapolis & Omaha railway. Will those who intend to go to Milwaukee notify us at once that we may have a full list of the delegates in time to make all necessary provision for their comfort in traveling between the Twin Cities and Milwaukee.

The railway chosen is the best line, and everything that can be done to make a pleasant journey will be provided. Don't fail to report at once.

The Pfister Hotel, in whose great hall the association will hold its sessions, will be headquarters for the Minnesota delegation. It is the finest hotel in Wisconsin and the rates may be learned by reference to another page. Should the delegates from any of the other Northwestern states wish headquarters at this hotel they can make arrangements by communicating with this office.

All living in the Northwestern states who intend to go to Milwaukee at the time of the meeting of the association should promptly report to Wm. R. Dobbyn & Sons, Minneapolis, who have been appointed to make all arrangements for railway transportation from the Twin Cities to Milwaukee. The Northwestern line has been selected, and the best that any railway can give will be at the disposal of the osteopaths for the going and coming trip. The Twin Cities will be a good place to rendezvous for a day's outing and the resident osteopaths will be delighted to make the day pleasant for their visitors. The train will leave Minneapolis Tuesday evening, 5th August, at 8 o'clock;

St. Paul at 8:30 p. m., and reach Milwaukee at 7:50 a. m. next day. We very much desire that every one should leave on the same train.

WM. R. DOBBYN & SONS.

Minnesota Osteopaths, Attention!

The Minnesota State Osteopathic association will have a banquet at its annual meeting Friday evening, Sept. 5, at the Windsor hotel, corner of St. Peter and Fifth streets, in St. Paul.

Every osteopath wishing to be present must secure tickets on or before Tuesday, Sept. 2. The price of one ticket is only one dollar and twenty-five cents (\$1.25). You can bring as many friends with you as you wish.

We expect to have an election of officers, and a most elegant feast for the mind, as well as a rich feast for the body.

Osteopaths outside of the Twin Cities can take advantage of the reduced rates for the state fair. By all means, take a vacation for a few days. Get acquainted with your fellow workers. Let us cultivate the fraternal feeling. Address all inquiries, and send all money for tickets to Dr. C. W. Young, Germania Bank building, St. Paul.

A Delightful Outing.

Saturday afternoon, the 28th of June, a bright and happy company of the Twin City osteopaths met at Minnehaha Falls to enjoy an outing and become better acquainted with each other. The afternoon was spent in sauntering about the park and traversing Longfellow Glen. At 6 o'clock the company assembled and luncheon was served under the management of Dr. Clara F. Gerrish and Mrs. Wm. R. Dobbyn. The company discussed the coming National Association of Osteopaths to be held in Milwaukee Aug. 6th, and Wm. R. Dobbyn was selected to make all necessary arrangements for railway transportation and hotel accommodations. An hour or two was thereafter spent in social intercourse, when the company dispersed glad of the occasion, and settled upon another outing, to be enjoyed at the Indian Mounds, West St. Paul, where an opportunity will be given to view the fish hatchery.

Iowa.

A Correction.

The acting secretary of the Iowa Osteopathic Association recently sent a report of the proceedings of that association to the Journal of the American Osteopathic Association at Chattanooga, Tenn., and someone else sent another report that was so changed and modified as to give

a false and misleading impression of the action of the Iowa association.

As a matter of fact, the Iowa association did not in any way, directly or indirectly, take any action in reference to the associated colleges of osteopathy as stated by the editors of the Journal of the American Osteopathic Association, but it did recognize the graduates of a number of individual schools as eligible to practice in Iowa, including the Still College, Des Moines, as well as some ten others, and naturally placing at the head of the list the college which is located in the state of Iowa.

Iowa Osteopathic Association.

The fifth annual meeting of the Iowa Osteopathic association was held in the assembly hall of the Still College of Osteopathy, Des Moines, June 26 and 27, 1902. It was the largest osteopathic association ever held in the world. Dr. Fletcher, at that time treasurer of the association, called attention to the fact a year ago that the Iowa association took the lead of the state associations, and the list of members was published in the Cosmopolitan Osteopath. An even hundred members has been added since that date, raising the number from 57 to 157. (The revised list just received shows 135.—Ad.) Besides members of the association, many visiting members from the adjoining and some distant states were present.

The meeting was not only great in numbers present, but in enthusiasm. Besides an interesting program, matters of special interest were before the convention. Among these was the important question of determining what schools should be recognized as of good standing by the association. This duty is imposed upon the association by the new law recently enacted. The following schools were recognized as being of the required standard:

Dr. S. S. Still College and Infirmary of Osteopathy, Des Moines, Ia.
American School of Osteopathy, Kirksville, Mo.
Atlantic School of Osteopathy, Wilkesbarre, Penn.
Bolles Institute of Osteopathy, Denver, Colo.
Boston Institute of Osteopathy, Boston, Mass.
California College of Osteopathy, San Francisco, Cal.
Northern Institute of Osteopathy, Minneapolis, Minn.
Northwestern College of Osteopathy, Fargo, N. D.
Pacific School of Osteopathy, Los Angeles, Cal.
Philadelphia School of Osteopathy, Philadelphia, Pa.
Southern School of Osteopathy, Franklin, Ky.

The Columbian school was recognized as meeting the required standard up to Sept. 1, 1901.

The following schools are also recognized as preparatory,

Quincy School of Osteopathy, Quincy, Ill.

Barber's School, Kansas City, Mo.

Minneapolis Institute of Osteopathy.

The osteopaths of the state were present in large numbers, and availed themselves of the opportunity of applying to the secretary of the State Board of Medical Examiners for certificates to practice. For the convenience of those who did not care to go to the capitol building, arrangements had been made for a notary to be present at the college, who certified to the applications, thus saving much time and trouble. At the business meeting it was also decided to continue the term of the present officers until the next annual meeting. For names of officers, see last page of this journal.

The report of the board of trustees was read by Dr. A. S. Craig, the secretary of the board. The recommendations were acted upon seriatim, and the more important ones adopted. Among these was the recommendation to incorporate the Iowa Osteopathic association. The board of trustees were instructed to take immediate steps to incorporate and to report at the next meeting of the association.

An amendment was made to the constitution, providing that in the future new members shall be admitted to the association only on the recommendation of three old members in good standing.

The following program was rendered:

Program of the Iowa Osteopathic association, held at Des Moines, Ia., June 26 and 27, 1902:

THURSDAY, 10:00 a. m.

Physical Exercise as an Auxiliary to Osteopathic Treatment

..... Thomas P. Bond, M. D., D. O., of S. C. O.

1:30 p. m.

Nerve Waste and Nerve Repair.... Dr. O. E. McFadon, of Davenport
Clinic—Tuberculosis..... Dr. Harry Forbes, of S. C. O.

FRIDAY, 9:00 a. m.

Chorea Dr. S. H. Runyon, of Creston

Osteopathic Obstetrics Dr. H. W. Bowden, of Des Moines

Legal Battles of Our Profession in Iowa

..... Dr. C. L. Parsons, of Iowa Falls

Business.

1:30 p. m.

Microscopic Diagnosis Dr. Blanche Thoburn, of S. C. O.

Acute Diseases Dr. D. P. Putnam, of Sioux City

Business.

Banquet in the evening.

In the evening the combined alumni and association banquet was held at the Kirkwood. A seven-course dinner was served, after which the time was pleasantly spent in toasting. Col. A. B. Shaw served as toastmaster, and in his genial manner prepared the way for the series of interesting toasts, which were responded to as follows: "Osteopathic Literature," Dr. Hazard, Kirksville, Mo.; "The Osteopathic Dude," Dr. F. W. Bechly, of Guthrie Center; violin solo, Dr. Turner; "Osteopathic Progress," Dr. Hildreth, of Kirksville; "Osteopathy in Des Moines," Dr. S. S. Still; "Our Relations," Dr. Forbes, Des Moines.

THE PROGRAM.

The program of the sixth annual meeting of the American Osteopathic association, to be held August 6, 7 and 8, at Milwaukee, is substantially complete as given below, though a few changes may be made in it.

The exercises for the three days are as follows:

FIRST DAY, WEDNESDAY, AUGUST 6.

Calling meeting to order.

Invocation.

Address of welcome and responses.

Communications from members not present.

Report of Credentials Committee.

Resolutions.

Annual Address—President E. R. Booth, Cincinnati.

Clinics—Conducted by W. D. McNary, M. D., D. O., of Milwaukee, and Dr. Ella D. Still, Des Moines.

Open Parliament.

"How Bony Lesions Cause Pelvic Disease"—M. E. Clark, Kirksville.

Report of Board of Trustees.

Report of Publication Committee.

"The Physiological Basis of the Therapeutic Law"—J. Martin Littlejohn, Chicago.

SECOND DAY, THURSDAY, AUGUST 7.

Report of Legislative Committee.

Clinics—Conducted by Dr. H. W. Forbes, Still College, Des Moines.

"Pathology of Certain Cervical and Dorsal Lesions"—J. W. Hofess, Still College, Des Moines.

"Fevers"—Guy Wendell Burns, New York.

Open Parliament.

"Osteopathic Obstetrics"—E. H. Boyes, Marietta, O.

"Pelvic Tumors"—C. E. Still, Kirksville.

"Prognosis"—Mrs. Nettie H. Bolles, Denver.

"Duty to the Association"—W. B. Davis, Milwaukee.
 Report of Education Committee.
 Fixing time and place of next meeting.
 Tally-ho coach ride.

THIRD DAY, FRIDAY, AUGUST 8.

Clinics—Conducted by Dr. S. S. Still, Des Moines.
 Symposium on Practice—H. E. Bernard, Detroit; O. J. Snyder, Philadelphia; W. W. Steele, Buffalo; C. W. Young, St. Paul.
 "Appendicitis"—Mrs. Ella Ray Gilmour, Sheldon, Ia.
 Open Parliament.
 Report of Special Committees.
 Election of officers.
 Unfinished business.
 Approval of minutes.
 Adjournment.
 Boat ride on Lake Michigan.

California.

From Los Angeles.

A number of the students of The Pacific School are taking a summer course in physiology and histology of the nervous system. The classes are under the guidance of Dr. Whiting. It is proposed to make these summer classes an important factor in school work hereafter. Cytology and general physiology are receiving more and more attention from all scientific men, while physicians of every school are recognizing the great value of the microscope as an aid in diagnosis. Osteopaths cannot afford to be ignorant of these things. It is hoped that the summer classes will render it possible for students to secure additional training in microscopic technique and in methods of original research.

The Pacific School has outgrown its old home, and plans for a new building, large, modern and well-equipped, are under consideration.

Alabama.

Osteopathy in Alabama.

"The Supreme Court of Alabama has just affirmed the decision of criminal court in the case of Dr. Brogg that osteopathy is the practice of medicine."—Letter from Percy H. Woodall to Col. A. B. Shaw, dated July 1st, 1902.

We have not yet learned the full particulars in this case. The one thing now to be looked after, however, in Alabama, is a good law recognizing the practice of osteopathy on the same basis as that of medicine, as in Iowa, Ohio, and other states, providing on what terms osteo-

paths may practice, fixing the standard of qualifications, examinations, etc. We trust our osteopathic friends in the state will not be discouraged, but look well to their laurels and secure a good law giving the new science the same legal recognition that it has already secured in more than one-third of the states of the Union.

New Jersey.

The State Association.

A meeting of the New Jersey Osteopathic society was held at the Asbury Park office of Drs. McElhaney and Davis, 417 Cookman avenue, this city. The attendance was large. Besides practitioners of the state of New Jersey, who are members of the society, other prominent osteopaths were present.

Dr. Achorn, president of the Boston Institute of Osteopathy, was present. He entertained and instructed the society in matters of interest to the profession.

The officers of the New Jersey Osteopathic society are: President, Dr. W. J. Novinger, Trenton; vice president, Dr. S. H. McElhaney, Newark; secretary-treasurer, Dr. G. D. Herring, Plainfield.

Dr. D. W. Granberry of Orange and Dr. W. J. Novinger of Trenton, were elected delegates to the convention of the American Osteopathic association to be held at Milwaukee, Aug. 6, 7 and 8. Drs. C. E. Parrish and Katherine Parrish of Morristown, Forrest Preston Smith and Helena Ferris Smith of Montclair, Joseph F. Starr and Ellen F. Starr of Trenton and R. M. Colborn of Newark were elected members:

Among the prominent members of the society present were Drs. E. W. Christensen of Paterson, Violetta S. Davis, Newark; D. W. Granberry, Orange; S. C. Matthews, Paterson; C. E. Fleck, East Orange.

Colorado.

Commencement at the Bolle's Institute, Denver.

The fourth annual commencement at the Bolles Institute of Osteopathy was held in the First Congregational church, Denver, Colo.

A very fine program had been arranged for the occasion, and was carried out with marked ability. Five graduated, whose names are as follows: Ida M. Andrew, Frank Irwin Furry, Bertha Hilton, Hettie McRoss and Mae Johnson Work.

The osteopathic reunion and banquet was also very successful, as may be seen from reading the following list of toasts, with names attached:

TOASTS.

Toastmaster	G. H. Buffum, D. O., M. E.
The A. O. A.	N. A. Bolles, D. O.
The Associated Colleges of Osteopathy	J. D. DeShazer, D. O.
Who is the True Physician?	W. A. Hinckle, M. D., D. O.
Our Legislator, Dr. Hildreth	T. J. Watson, D. O.
Our Sisters in the Profession	E. D. Jones, D. O.
The Stomach	N. H. Bolles, D. O.
The Spine	Burt D. Mason
The Skeleton	Mrs. McClain
Colorado, the Land of Sunshine	H. M. Ross, D. O.
"Is the Doctor Worthy of His Hire?"	J. A. Rush, L. L. B.

List of Associated Colleges.

[By an error between proofreader and printer, from the list of associated colleges in our last issue the names of three colleges were omitted. The complete list is given below.—W. R. Dobbyn & Sons, Pub'r's.]

Dr. S. S. Still College of Osteopathy, Des Moines, Iowa.
 American School of Osteopathy, Kirksville, Mo.
 Atlantic School of Osteopathy, Wilkesbarre, Pa.
 Bolles' Institute of Osteopathy, Denver, Col.
 Boston Institute of Osteopathy, Boston, Mass.
 California College of Osteopathy, San Francisco, Cal.
 Northern Institute of Osteopathy, Minneapolis, Minn.
 Northwestern College of Osteopathy, Fargo, Dak.
 Pacific School of Osteopathy, Los Angeles, Cal.
 Philadelphia School of Osteopathy, Philadelphia, Pa.
 Southern School of Osteopathy, Franklin, Ky.

Anatomical Wedding.

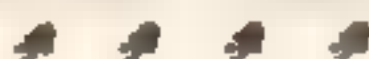
The following bright and amusing portrayal of an "anatomical wedding," by Mr. W. L. Dicken, in the Southern Journal of Osteopathy, will commend itself, especially to those who are familiar with anatomical terminology:

"At the elegant home of the bride's father, on McBurney's Point, by the Rev. Leuc-ocyte, Mr. Bili-rubin to Miss An-thrax. The march was executed by Miss Ros-eola on one of the organs of Corti. Many distinguished guests were present. The gallant General Paresis, who was wounded while crossing Hunter's Canal, and the bluff old Major Surgery, who led the Phagocytes up Mylo-Hyoid Ridge. There were

the two country cousins of the bride, Mole-cule and Poly-nuclear. And, oh, my, wasn't that Par-a-site? Among the ladies were Misses Rube-ola, a sister of the fair organist, Ade-nitis, Ana-sarca, Kary-okinesis, Anorexia Pseu-dopodium, Coty-loid and others. Among the gentlemen Peri-cardium, Lum-bago, Mac-rocyte and his brother Mike, Cy-anosis, Q Boid, Peri-stalsis, Sci-atic, etc. The bluff old Major while awkwardly strolling about the room amid the Venous Hum ran plump against the bride's Anti-sepsis. Then you just should have heard Anti-cus-Major! The old General sprang to his feet and drew a half-dozen pistols—at least he was heard to Coc-cyx. A Systolic Murmur ran around the room, but the fair bride went to the General and raising her Ox-id-ize to his begged him to desist. He admitted that nothing could be Cilia than his anger and sat down. The Major wore a long Sclerotic Coat which was torn, but this could be mended with a couple of Peyer's Patches and order was restored. The presents were many and valuable. A fine Gall Stone from the Columns of Goll, a pair of Coeliac-Axes from the Lumbar Region, a lump of coal from a Teres Minor and a Branch from the Palmar Arch. A Superior Longitudinal Bundle was opened and found to contain an elegant pair of ear-stones from the Great Trochanter himself. The Major's present was a pair of jolly genial tubercles which were placed in the Mastoid Cells till tamed. The banquet consisted of Wharton's Jelly, Foul Tongue, Wing of the Sphenoid and other dainties served in Cribriform Plates. The fine large Thoracic Duct, caught by a Glasserian Fissure on the Vidian Canal and cooked by the Mental Process, was much enjoyed. The wild Irishman, Ptery-goid, brought Liquor Amnii up from the Sella Turcica, but the Major, being in an Aqueous Humor, drank only water. When the cake was cut the Femoral Ring was found by Cora-coid. The bride then passing over the Perineal Floor went to the Posterior Chamber of the eye, took a short rest on the Anterior Pillars of the Fornix, after which the happy pair took a train which left over the Optic Tract for the Island of Reil, where they spent their honeymoon."



College Notes.



A Graceful Acknowledgement and a Polite Request.

The Still College, Des Moines, has received an elegant present of a group photo, from the June, 1902, graduating class of the N. I. O. Among the furnishings recently shipped from the same institute we are pleased to find a fine group picture of each of the graduating classes of that institution. We will take it as a special favor if some member of each class who is in possession of a class picture will prepare a list of the graduates of his class, so arranged or numbered that we may be able to tell the corresponding picture, as we wish to have the names correctly placed upon each group in connection with the corresponding photo.

Prize Drawings.

According to the usual custom, Dr. S. S. Still, president of Still College of Osteopathy, Des Moines, has made during the past year two gifts as prizes for the best drawings in anatomy. One prize is awarded each term. The successful contestants for the prizes during the past year were Drs. A. A. Knecht of the June class, 1902, and T. J. Ruddy of the January class, 1903. As usual, the prize selected was Gould's Medical Dictionary, although the usual custom was observed of offering a choice of any of the standard single volume dictionaries of the English language. Dr. Knecht's drawing is a fine reproduction in colors of the "Distribution of the Pneumogastric." Mr. Ruddy's drawing, also in colors, is an excellent representation of the "Byron Robinson Circle," showing renal and sympathetic relations.

Graduating Exercises at the S. S. Still College.

(From the Des Moines Leader.)

In spite of the din that arose from the scene of the Elks' Festival below, the commencement exercises of the Still College of Osteopathy at the Y. M. C. A. building last evening were by far the most inter-

esting ever held by the school. Eighty-seven graduates and post-graduates received their diplomas and degrees from President S. S. Still, Judge S. F. Prouty delivering the commencement address. The auditorium was crowded to the extent of its capacity, not only on the floor, but in the gallery as well, and many were standing.

The official color of the class of 1902 is royal purple. This was conspicuous in the bunting which hung in festoons in the rear of the rostrum. White bunting was used as a background for the purple, and thus the color scheme was complete. The platform was banked with palms and was bright with flowers. In a space reserved in the front rows of seats sat the graduating class, with their friends on either side. Each member of the class wore cap and gown.

The programme opened with a cornet solo by A. D. Laird. Following the invocation by Dr. A. B. Marshall of the Central Presbyterian church, Mrs. Grace Clark De Graff sang a solo. Judge S. F. Prouty was then introduced by President Still. In his address Judge Prouty gave some forcible and practical advice to his hearers in regard to the means of attaining success. His thought centered around the necessity of honesty and of industry and these two words formed the keynote of his address. He received close attention and warm applause.

After a selection by the Still College orchestra President S. S. Still delivered a brief address to the class, in which he expressed his congratulations and good will. Mrs. De Graff sang two numbers, and then came the awarding of diplomas. Dr. Still was assisted in the presentation by Col. A. B. Shaw and Professor Hofsess. The programme closed with the benediction by Dr. Marshall, following a selection by the orchestra.

The S. S. Still School.

From the Kirksville Graphic, Thos. E. Sublette, Editor, June 27, 1902.

Dr. Still, of Des Moines, was in Kirksville the early part of June and gave us a cordial invitation to visit the college if business should ever call us to that city. Fortunately we did not have long to wait, as a business deal caused us to visit Des Moines recently. We found the doctor as agreeable as ever and his kind manner reminded us of the days when he was professor of anatomy in the American School. He took us over the entire building from the basement to the fourth floor. The most interesting room to a layman was the one in which they do their dissection. We found thirteen bodies nicely arranged on tables and a number of students finishing up their term's work in this

department. Dr. Lenora Carpenter had charge of the dissecting room and had her work completely in hand. Dr. Still told us that requests from graduates of other schools had been so frequent and so urgent that he had decided to hold a summer school during July and August to accommodate those who had been unable to get dissection in their own schools.

The terms for the July dissection, which includes one quarter and lectures on several other subjects, is \$15. The August dissection, which includes the other quarter, is \$6.25. The Still College at Des Moines has been so fortunate in getting material for dissection that no student has ever been graduated without having had a full lateral half, and no student has ever been compelled to remain after his graduation in order to get dissection.

The present graduating class numbers between ninety and a hundred. The last September class was the largest that has ever matriculated. The college has eighteen professors, every one of whom does active college work. President Still does forty hours' lecturing per month, besides treating a large number of patients. Every officer of the institution who draws a salary does his full quota of college work. The secretary, Col. A. B. Shaw, a most genial gentleman, makes a specialty of X-radiance. The college possesses one of the finest machines in the world, and patients are sent to the college for X-ray examination by medics and osteopaths from many towns besides Des Moines.

Kirksville people are always glad to hear of Dr. Still's success, as he was at one time one of us, and he still delights to speak of himself as a "formerly of Kirksville."

Des Moines is a beautiful city, and students will find it an ideal place to spend the summer months and pursue their studies. The S. S. Still school is the pride of the town and is prospering beyond the most sanguine expectations of its founder. The fine building with class, treating, and assembly rooms, the strong faculty, and splendid equipment make it probably the strongest and most successful osteopathic school in the country. Dr. S. S. Still will ask for a financial statement from all the colleges in the Association of Colleges of Osteopathy, of which he is president.

The low price for dissecting indicates that the S. S. College of Osteopathy is not being run to pile up money, but to turn out men and women skilled in the art of healing.

Personals

Dr. Dain L. Tasker's new book will soon issue from the press.

Dr. Crowley, of Minneapolis, is enjoying nights and Sundays at Minnetonka.

Mrs. Dr. Wilson, of St. Paul, is now visiting in the west. She expects to return soon.

Dr. G. L. Huntington, of St. Paul, is still in the northwest. He is expected home before long.

Dr. B. S. Peterson has decided to locate at Gretna and Springfield, Neb., with headquarters at Gretna.

Dr. Young, of St. Paul, will be the official representative of the Minnesota State Osteopathic Association.

Mrs. Andrew Peterson and daughter, of Omaha, Neb., attended graduation exercises at Still college, Des Moines.

Dr. Young, editor of the health department, whose writings are much appreciated, is building a fine practice in St. Paul.

Dr. H. C. Bennett, who has been practicing at Greeley, Colorado, made the Still College, Des Moines, a pleasant visit recently.

Dr. Wm. Snell has made osteopathy respected in Tacoma, Wash. He has established a fine practice and has met with good success.

Dr. Irene Harwood, secretary of American Osteopathic association, is well satisfied that the Milwaukee meeting will be well attended.

The arrival of a nice ten-pound boy on July 10, is announced at the home of Dr. Thomas P. Bond, professor of surgery at the Still college.

Dr. Geo. F. Burton, Los Angeles, Cal., is one of the busiest men on the Pacific coast. He is an ideal osteopath, and deserves to succeed.

Dr. Boylan, who has been practicing in Minneapolis for the past year, will probably settle in one of the Pacific coast states. He carries

Dr. Lenora Carpenter entertained the members of the Summer School of Osteopathy, at her home on West 37th Street, Des Moines, and an enjoyable time was had by all.

Dr. J. W. Dixon, formerly of Fremont, Ohio, writes that he is now located at London, Ohio, and is succeeded at Fremont by Dr. B. R. Mansfield.

Dr. Martin, Battle Creek, Mich., is very much encouraged over the prospects of osteopathy in the "beautiful city." A pleasant letter was received from him.

Dr. Chas. D. Flanagan, Providence, R. I., has been deprived of the pleasure of a visit to the west, because of an important practice, which is daily increasing.

Dr. Louis J. Covell, N. I. O., is meeting with such success in Albion, N. Y., that he sent for his mother, Dr. Martha J. Covell, of Minneapolis, to assist him.

Dr. Percy H. Woodall, formerly of Montgomery, Ala., will spend the months of July and August at Nashville, Tenn., after which he will be located at Franklin, Ky.

Ohio has no more business-like, competent osteopath than Dr. H. H. Gravett, of Piqua, that state. Dr. Gravett merits the success which is his. May still greater successes follow.

Dr. M. R. Ely, Rochester, Minn., is winning golden opinions from his fellow citizens, and osteopathy, as represented in his infirmary, is taking a strong hold upon public opinion.

We learn that Dr. Samuel H. Runyon, of Creston, Ia., was married to Margaret B. McCulley, at Omaha, Neb., July 14, 1902. Our best wishes are extended to the doctor and his wife.

Dr. Whiting will represent the Southern California Academy of Sciences at the Long Beach assembly of Chatauqua. After that he will join a few kindred spirits in original work in embryology.

The publishers of The Northern & Cosmopolitan Osteopath take pleasure in acknowledging a visit from Dr. Florence Patterson, Winona. The doctor reports that city as a promising field for osteopathy.

One of Iowa's most appreciated physicians is Dr. J. S. Kroh, of Algona. He is one of those men who impress themselves upon the community. Osteopathy never "dies out" where such men practice.

Dr. Gerrish, of Minneapolis, is taking every other day for recreation and rest during the months of July and August. She has well earned a rest. Dr. Bailey will be in attendance in her office during the days she is absent.

From a letter from Drs. Benefiel & Benefiel, Lake City, Ia., we learn that their prospects as osteopaths are very encouraging. Dr. A. H. Benefiel is one of the brightest men in the profession, and his wife is his better half.

A letter from Drs. Gleanan & Peebles, of Kalamazoo, Mich., displays the right spirit—the spirit of enterprise in introducing osteopathic literature. These gentlemen appreciate the power of the press and are using its products to promulgate the principles of osteopathy in their city.

Dr. H. N. Broadbridge, of Allston, Mass., is another of those physicians who understand the value of the publications in osteopathy, and his determination to sow his territory “knee deep” with the best osteopathic literature, is to be commended.

Drs. Lifring & Lifring, of Mansfield, Ohio, are building up a lucrative practice, and at the same time establishing themselves well in the best social stratum of their city. The editor and publishers send congratulations upon the good news received of them.

Dr. R. D. Emery, president of the California state association, will spend a few weeks at Lake Tahoe, after the meeting of the association.

Dr. C. H. Phinney will spend his vacation in Colorado. He will represent the Pacific School in the National Association.

Dr. D. L. Tasker and Dr. C. A. Whiting will address the meeting of the State Osteopathic association in San Francisco, August 8 and 9. Dr. Tasker is visiting a number of sanitariums in order that he may adapt all their best features to the plans of the new osteopathic sanitarium. Dr. J. O. Hunt is caring for Dr. Tasker's practice.

President Achorn, of the Boston Institute of Osteopathy, sent the publishers a copy of his catalogue for 1902-3. It is a severely neat booklet from a typographical point of view, and a dignified announcement for his college. We judge the institute is winning substantial recognition in New England.

A very satisfactory letter from Dr. Ida F. Rosecrans, Kalispell, Mont., indorses Dr. C. W. Young's work in the health department of our magazine. Many other short commendatory references have come to the publishers. We mention that of Dr. Rosecrans, because we propose publishing the communication in full in our September number.

Charles City, Ia., Press says: “Dr. C. W. Johnson is one of the busiest men in this city, and is having fine success with osteopathy.” We have heard this report frequently from the practice of Dr. Johnson, and know that his income is twice or three times that of the average principal of schools in Iowa, which was formerly his profession.

Dr. E. J. Freeman, dean of the Northern college is preparing a booklet on osteopathy, designed for the lay reader, as well as the physician, which promises to be one of unusual excellence. The booklet will be published by Wm. R. Dobbyn & Sons, and it is hoped to be ready for the National Association.

Dr. Clara E. Sullivan has resigned her position as instructor in the Southern School of Osteopathy, which she has held for the past year, and has associated herself with the Tri-State Osteopathic Institute, of Wheeling, West Va. This should bring added prosperity to both Dr. Sullivan and Dr. Doneghy, who four years ago established the Tri-State Osteopathic Institute.

A pleasant letter from Dr. John H. Lowe, Redwood Falls, Minn., informs us that the prospects for osteopathy are very good in that city. Redwood Falls is settled with a very intelligent class of people, and is the center of a fine country. It should readily respond to the aggressive advocacy of an intelligent osteopathic physician. Dr. Lowe shows good business instinct by ordering literature for circulation in his city.

Minneapolis has another osteopathic physician added to its already large list. We refer to Dr. H. L. Studley, who has just graduated from the S. S. Still college at Des Moines. Dr. Studley had a very creditable college career and availed himself of the superior advantages offered by the Still college for extra work, making a fine record for himself in gynecology and orificial surgery. We extend the hand of welcome to Dr. Studley, and hope for his success.

Mrs. Furman J. Smith, of the June class (1902) S. C. O., is located at Springfield, Mo., where her husband is engaged in business. Her office is in the same building, and just across the hall from the office of Dr. T. M. King, assistant secretary of the A. O. A. Dr. King, in speaking of her arrival, says he finds her to be a very pleasant lady, and that she will no doubt be an advantage and a credit to the science in Springfield.

Our readers will be pained to hear of the severe sickness of Dr. Dain L. Tasker, of Los Angeles, Cal. A brief letter to the publishers locates him at the Pacific hospital, suffering considerably. He hoped when writing to soon be in some mountain retreat, where speedy recovery would overtake him. Dr. Tasker will have the sympathy of his many friends from the Pacific to the Atlantic and their earnest hope that he may soon be entirely well.

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